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ABSTRACT

This theme issue of "Coordinators' Notebook" focuses on how early childhood care and development (ECCD) programs world-wide can work with parents and caregivers to support children from birth to 3 years of age. Section 1 of the journal describes the needs of parents and families and the development of parent programs around the world. Section 2 highlights the needs of infants and toddlers and the importance of appropriate care. Section 3 considers the key question regarding the kinds of support parents and caregivers require and the best way to provide that support. Section 4 considers the components of parent programs in developing countries: (1) program content, including health and nutrition, stimulation, and developing materials for children; (2) curriculum development, by professionals based on information thought to be universal, by professionals with local adaptations, by professionals based on local observations, by professionals based on childrearing studies, or through a generative process; (3) curriculum delivery procedures; (4) service providers, including professionals, trained local or outside facilitators, or trained local volunteers; (5) information delivery, including home visiting, parent groups, media/distance education, and working within existing services; (6) program costs; and (7) evaluation findings related to outcomes for children, parents, and providers. Also included is a discussion of what information is needed to better reach infants and toddlers through parenting programs. The journal concludes by pointing out that supporting families includes helping them to adapt their

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parenting in ways that respect their traditions but also that support the health and safe development of their children within a changing milieu. The journal's regular feature, "Network Notes," reports on activities, meetings, and the calendar of the Secretariat and of the Partners of the Consultative Group on ECCD. (Contains 51 references.) (KB)

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Coordinators' notebook

An International Resource for Early Childhood Development

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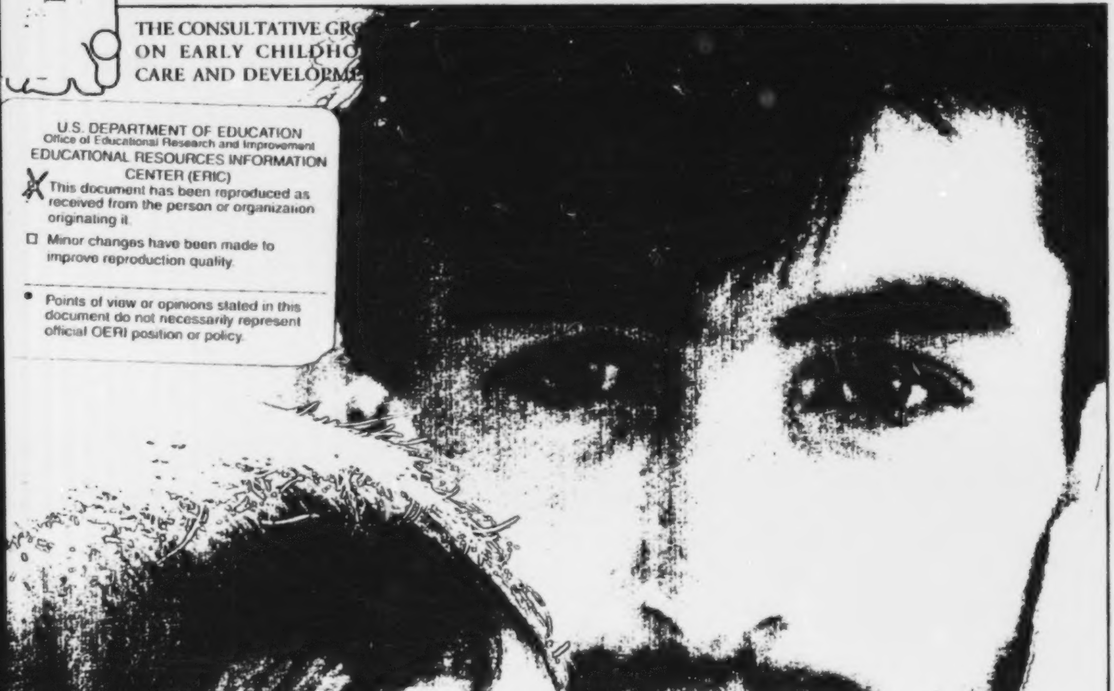

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Working with Parents and Caregivers to Support Children from Birth to Three Years of Age

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> **"Taking care of the best interests of the child, as set out in the Convention on the Rights of the Child, must not be seen as a threat to the family, but as a challenge for society."**
>
> —Malta World NGO Forum

JUDITH L. EVANS

One of the greatest challenges for the early childhood field is to find appropriate ways of supporting the growth and development of children from birth to three years of age. What makes this such a challenge? There are several answers to this question. First, we know how important the earliest years are in terms of establishing the base for later learning; thus we want to ensure that all children have access to appropriate supports. Second, programmes for children under three years of age are much less well developed than programmes for those who are considered to be of pre-school age (children from age three to school entry). The programmes that do exist for the youngest children are offered primarily by the health and social welfare sectors, and they tend to focus on children's survival, with only minimal regard for child stimulation and without a holistic perspective. Third, most children in this age group are taken care of within the family during these years. While increasingly there is a need for children to be cared for outside the home, most parents would prefer to be able to provide care at home.

The challenge here is how best to provide support to families while they provide direct support to the child.

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The demands on families and the support that is available to them have shifted tremendously over the last twenty years.

For those young children who are cared for within the home, the question then becomes, how do we ensure that they get the kinds of supports they require in order to thrive? The obvious answer is that we need to work both with parents and with the family as a whole. If we accept this premise, we are brought to a second series of questions. What kinds of interventions can be created for working with parents? How do we reach them? How do we work with them? What do we want parents to know, and how do we bring that knowledge to them? And, what kinds of support do parents need from the wider society? What is it that parents themselves need?

This article attempts to answer some of these questions, but, not surprisingly, in doing so it raises even more questions. Nonetheless, we begin with a description of the needs of parents and families today. This is followed by a description of the needs of young children birth-three years of age. The following sections provide an overview of the strategies that have been developed for working with parents, a discussion of what has worked and in what ways, and some ideas for the way forward. The final section outlines what we need to know more about in order to better meet the needs of parents of young children in the context of the family and community.

Parenting and Families

Around the world, in both Majority World countries and in industrialized nations, the demands on families, the conditions in which they live, and the expectations they hold have shifted tremendously over the last twenty years. The on-the-job training many parents used to receive from extended family members or from religious and cultural traditions is largely unavailable to contemporary parents. Whereas in the past most societies could claim a normalized parenting pattern—either an extended family model, a community/tribal model, or a nuclear family or some other stable pattern—now most societies are reporting that their family norms have been disrupted, and the effects on children and parents alike are devastating.

At the same time, children need parenting. *Parenting is defined as the provision of the ongoing care and supports that a child needs in order to survive and thrive. All children have the need and the right to be parented.*

While the assumption is that a child's biological parents will provide parenting, this assumption is not always valid. For an ever-increasing number of the world's children, biological parents are simply not available most of the time, and sometimes not at all. Parents are leaving children behind to go in search of work; they are losing children in the context of diasporas and armed conflicts; they are leaving children in the care of other children while trying to earn a living; they are dying of AIDS; they are being ravaged by drugs and poverty; they are trying to carry on while juggling the inhuman demands caused by long work days and by the demands placed upon the ever-growing number of single-parent households. These circumstances mean two things. First, parents need support. Second, when parents are not available, others can and do fill that role, and therefore support must be provided to them.

Parent Programmes

The concept of supporting parents has existed for decades, but the definition and manner of implementing parent support programmes have changed over time. Parenting support has evolved to reflect our new knowledge of early child development (birth to six years of age), to incorporate a broader interpretation of who should and does provide care for children, and it has grown to include innovative, efficient strategies to provide children with appropriate supports.

The most recent global activity promoting family support programmes came from the Malta World NGO Forum in 1994, which launched the International Year of the Family (IYF). The Forum had as its theme "Promoting Families for the Well-being of Individuals and Societies," and it provided a "realistic and global approach to the family as the 'basic unit of society' and the natural environment for the healthy development of all its members and of every society." (UNESCO 1995, 5) The intent within the Forum was to raise awareness, interest, concern, support, and action on behalf of the family. IYF marked the "beginning of an on-going process to empower families to recognize their resources and carry out their responsibilities in a changing world, strengthened in ways that increase equality between men and women, and in respect of the diversity of family structures worldwide." (6)

Among the specific concerns and focal points of the Forum were the following statements about the role of families in providing support for children:

- The family must be the main agent in protecting the Human Rights of its members, especially the vulnerable. It must answer the needs and promote the potential of its individuals as physical, social, emotional, intellectual and spiritual beings. (8)
- On their own, families can no longer provide all that children need to grow up well. It requires an interlocking system in which families and accompanying formal and informal networks and services work together. The challenge in our time is to arrive at a new relationship between family and the state. The family must, in a new way, become the protagonist of family policy; it must be ensured that laws and state regulations not only do not offend but also enhance the role of the family. (8)
- There must be a new awareness of family concerns and needs, even while recognizing that families are in transition and that new and different needs must be addressed. (8)
- Family policies and family interventions must be based on a careful and verified analysis of family realities, and on a comprehensive view of family life—not on untested, implicit assumptions. (8)
- Training of NGO personnel working with families in practical methods of life-coping skills must aim at encouraging families to build on their own resources and to overcome difficulties by relating to family networks. (10)
- Taking care of the best interests of the child, as set out in the Convention on the Rights of the Child, must not be seen as a threat to the family, but as a challenge for society. (13)

The tenet that families have the primary responsibility for supporting the growth and development of their children, with the State providing support to families, is echoed in government policies throughout the world. The implication of this is clear: programming efforts to support young children birth to three must begin by considering what supports need to be provided that will help families to thrive, and by considering how care for young children can be strengthened within the family.

While recognizing that true support for families requires a systemic approach, a key component in supporting the family is to find appropriate ways to work with parents. Thus the strategies described in this article begin with those aimed at parents, and given the fact that the focus of the article is on children birth to three years of age, the ways of working with the parents of this age group further defines the scope of this article. However, before turning to some examples of parenting programmes, it is useful to have a better understanding of the characteristics of the children who are the focus of these programmes. Some of what we know about children in the birth to three age group is presented in the section that follows.

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What We Think We Know about Young Children's Development Shows the Importance of Attention to Children Birth to Three

In reviewing recent literature on children's development, the Consultative Group on Early Childhood Care and Development (1996) summarized what is known about the needs and abilities of children during the earliest years as follows.

It is well established scientifically that the early years are critical in the formation of intelligence, personality, and social behaviour, and that the effects of early neglect can be cumulative. Research suggests that there are critical points in children's development where it is important to ensure that children are having the kinds of experiences that support their growth and development. The field of molecular biology brings new understandings of the way the nervous system functions, the ways in which the brain develops, and the impact of the environment on that development. For example,

- *Brain development taking place before age one is more rapid and extensive than previously realized.* The months immediately after birth are critical in terms of brain maturation. During this time the number of synapses—the connections that allow learning to take place—increase twenty-fold.
- *Development of the brain is much more vulnerable to environmental influence than earlier suspected.* Nutrition is the most obvious example, but the quality of interactions a child has, and a child's cumulative experience (health, nutrition, care and stimulation) during the first eighteen months, leads to developmental outcomes, which for children from poor environments may result in irreversible deficits.
- *The influence of the early environment on brain development is long lasting.* A child's early exposure to good nutrition, toys, and stimulating interaction with others has been proven to have a positive impact on that child's brain functions at age fifteen, when compared to peers who lacked this early input—and the effects appear to be cumulative.
- *The environment affects not only the number of brain cells and the number of connections, but also the ways in which they are wired.* The brain uses its experience with the world to refine the way it functions. Early experiences are important in shaping the way the brain works.
- *There is evidence of the negative impact of stress during the early years on brain function.* Children who experience extreme stress in their earliest years are at greater risk for developing a variety of cognitive, behavioural, and emotional difficulties than peers without this stress.

In summary, much of the brain is already formed at birth, and during the first two years of life most of the growth of brain cells occurs, accompanied by the structuring of neural connections. By age six, most of these connections are made (or not, as the case may be). Thus, providing opportunities for complex perceptual and motor experiences at an early age favourably affects various learning abilities in later life and can even compensate, at least partly, for deficits associated with early malnutrition. (Consultative Group 1996)

Other research continues to accumulate, indicating that the early years are critical in the development of intelligence, personality, and social behaviour. For example,

- *Children are born with physical, social, and psychological capacities allowing them to communicate, learn, and develop. If these capacities are not recognized and supported, they will wither rather than improve.*
- *Children whose caregivers interact with them in consistent, caring ways will be better nourished and less apt to be sick than children who do not receive such care.*
- *The establishment of a loving relationship in the early months of life has been shown to affect a person's ability later in life to love and to establish permanent relationships.*
- *Longitudinal studies demonstrate long-term effects with a variety of intervention programmes. These effects go beyond the learning of basic abilities to include: improved school attendance and performance, reduced repetition, increased employment, reduced delinquency during the teenage years, and reduced teenage pregnancy.*
- *Improving a young child's health and nutrition, and providing opportunities for stimulating interaction and early education, can bring a high economic return to society as well as to the individual.*
- *To the extent that programmes of early childhood care and development affect subsequent education, the evidence suggests that they will also have an impact on fertility and population growth, and thus there are inter-generational effects.*
- *There can be significant multiplier effects, especially in the case of family support and parent education programmes; the immediate effects on one child will carry over to the raising of additional children.*

Clearly research supports the assertion that it is important to support children in their development from birth to age three, and it is important to make sure that the care they receive from parents, older siblings and extended family members, daycare providers, and others is supportive of their full, healthy development.

While these more general comments build a strong case for focusing interventions on children birth to three years of age, when designing programmes that will provide the kinds of support these children need, it is important to have a more detailed understanding of early child development. In the section that follows the needs of young children are defined more specifically in terms of the knowledge, skills, and abilities that are being developed at each stage, and in terms of the kinds of supports required from parents and other caregivers to meet those needs.

Characteristics of Young Children Birth to Three

During the first three years children learn faster than they will ever learn again in their lives. They go from being dependent on others to meet all of their needs to becoming moderately independent beings who have quite a bit to say about what they need and how they want those needs met. A more specific delineation of developmental differences across the birth to three spectrum is provided by Donohue-Colletta (1992) in Table 1. In addition to a description of the characteristics of young children from birth to about age three, there is a description of what children need during that time to best support their growth and development. In a review of Table 1 it is possible to see that children's growth and development during the early years changes dramatically from month to month—almost from day to day.

Table 1—**Children's Developmental Needs**

APPROXIMATE AGE	WHAT CHILDREN DO	WHAT CHILDREN NEED
Birth to 3 months (inclusive)	begin to smile track people and objects with eyes respond to faces and bright colours reach, discover hands and feet lift head and turn toward sound cry, but often soothed when held	protection from physical danger adequate nutrition, exclusive breastfeeding if possible from birth to six months of age adequate health care (immunization, oral rehydration therapy, hygiene) an adult with whom to form an attachment responsive, loving interactions with significant, consistent people an adult who can understand and respond to their signals things to look at and hear
4 to 6 months (inclusive)	smile often prefer parents, consistent caregivers and older siblings repeat actions with interesting results listen intently respond when spoken to laugh, gurgle, imitate sounds explore hands and feet put objects in mouth sit when propped, roll over, scoot, bounce grasp objects without using thumb	All of the above, plus: things to look at, touch, hear, smell, taste opportunities to explore the world appropriate language stimulation daily opportunities to play with a variety of objects

7 to 12 months (inclusive)	remember simple events identify themselves, body parts, familiar voices understand own name, other common words say first meaningful words explore, bang, shake objects find hidden objects, put objects in containers sit alone creep, pull themselves up to stand may seem shy or upset with strangers	All of the above, plus: consistency in the environment and in adult expectations of the child encouragement of effective language usage
1 to 2 years (inclusive)	imitate adult actions speak and understand words and ideas enjoy stories and experimenting with objects walk steadily, climb stairs, run assert independence, but prefer familiar people recognize ownership of objects develop friendships solve problems show pride in accomplishments like to help with tasks begin pretend play	All of the above, plus: support in acquiring new motor, language, thinking skills a chance to develop some independence help in learning how to control their own behaviour opportunities to begin to learn to care for themselves opportunities for play and exploration play with other children health care must also include deworming
2 to 3 1/2 years (inclusive)	enjoy learning new skills learn language rapidly always 'on the go' gain control of hands and fingers are easily frustrated act more independent, but are still dependent act out familiar scenes	All of the above, plus: positive role models opportunities to: make choices; engage in dramatic play; sing favourite songs; work simple puzzles; learn cooperation, sharing, helping

Source: Adapted from National Association for the Educational of Young Children, 1985, 1995, and Donohue-Colletta, 1992.

As can be seen in Table 1, children have different requirements as they progress through the various stages and as they develop new skills and capacities. Individuals supporting children's growth need to be aware of the changes that are occurring and the kinds of support they can provide to further promote the child's development.

The Importance of Care

One of the keys to supporting the child's optimal development is to provide appropriate care.

Care includes much more than keeping the child safe and free from harm. Care is an interactive process. It is the parent/caregiver in interaction with the child that determines the quality of care received and the ways in which the child develops. It is important to note, however, that there are several variables that determine the quality of care. Some of these variables reside in the child. Engle, Lhotska, and Armstrong (1997) provide a summary of some of the characteristics of the child that are likely to have an impact on the care she/he receives, which, in turn, will contribute to the child's overall development. These include:

The way the child presents. This is a combination of the child's temperament, behaviour, and appearance. A child who is attractive and actively engages with adults is far more likely to get attention and care than the child who does not make eye contact and who is considered unattractive by local standards. Children who are not responsive and/or are sickly may not be given adequate attention; with little or no response from the child, the adult is not motivated to persevere. A child with physical or emotional disabilities may be at greater risk of under-nutrition than children without disabilities, again because adults are less likely to engage with them.

The child's developmental age and the health and nutritional risks the child is facing. Children have different needs at different stages during the early years. During the first year of life the child is at the greatest risk of mortality. During late infancy (or when complementary foods are introduced) and during the toddler period, the child is at greatest risk of growth faltering. Engle, Lhotska, and Armstrong (1997, 7) elaborate:

- In the first six months of life, malnutrition tends to be less common if the mother is breastfeeding exclusively. During this period, the most important care practices are centred on the lactating woman and her breastfeeding. Investments made in children's nutrition during this time can result in a significant decrease in rates of malnutrition both for the children themselves, and for the next generation.
- When infants begin consuming foods in addition to breastmilk, they are at risk of infection and malnutrition. When the child begins to eat complementary foods, then food preparation, food storage, and hygiene become important. Because food must be eaten frequently in small amounts, storing it hygienically is most important in the period from six to eighteen months.
- During the critical period of the second year of life, children may not yet be able to signal their desire for food effectively, and may be unable to obtain food on their own. At this age, language development and gross motor skills may increase a child's ability to obtain food.

The social value of the child. Children may elicit different kinds of care as a result of their perceived value within a culture.

- When males and females are not valued equally, care may be different for each gender. In some societies, girls receive equal treatment in terms of access to food, health care, education, attention, and affection, whereas in others, girls receive less. In South Asia and China, where discrimination against girls has been most clearly documented, girls have been found to receive less timely medical care, a smaller proportion of the family food, and less breastfeeding. Gender differences can also be seen in a preference for a boy child, or the ratio of women who state that they would like their next child to be a boy compared to those who would like their next child to be a girl. In South Asia, boys are strongly preferred, whereas in Latin America and parts of Sub-Saharan Africa, preferences are not as pronounced.[1]
- A child's parentage, such as being the child of a single parent or stepparent, or being the offspring of a non-sanctioned relationship, may negatively influence care practices.
- Birth order can be a determinant of how children are cared for. First-born children may be raised by a maternal grandmother, which may or may not be an advantage depending on the care provided by the grandmother, but it is like-

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[1] According to Engle, Lhotska, and Armstrong (1997), mothers were over twice as likely to want a boy as a girl in Pakistan (4.9 times more likely), Nepal (4), Bangladesh (3.3), Korea (3.3), and Syria (2.3) (UN 1983). On the other hand they were equally likely to prefer a boy or girl in Latin America [Mexico (1.2), Peru (1.1), Costa Rica (1.0) and Venezuela (0.9)], the Caribbean [Jamaica (0.7)], and Kenya (1.1). Gender preferences can also be seen in the ratio of women per 100 men, which is greater than 100 in most of the developed countries, slightly over 100 in sub-Saharan Africa and Latin America, and below 100 in South Asia (94 in Bangladesh and India), East Asia,(95 in China) and the Middle East (81 in Saudi Arabia) (UN 1995).

ly to be different from what the mother provides. In general, those born later (fifth or higher) receive less adult attention.

The context within which the child is being raised. Some children need extra psychosocial care because of inadequate care in the past (e.g., as victims of war or abuse). In addition, when a family is under economic or social stress, children are less likely to receive adequate care.

In summary, in the interactions that occur as adults support their child's development, one set of variables that affects the nature of this interaction are those related to child characteristics. Some of these characteristics are likely to draw in the caregiver, setting up and reinforcing a cycle of positive interactions that support the child's development. Other child characteristics and experiences are going to make it more difficult for the parent/caregiver to provide appropriate care. However, the child is not the only actor in the care drama. The characteristics of the parent or caregiver are also important.

When the parent/caregiver has time and energy then she (or he) can engage more readily with the child. When there are multiple demands on her/him (from work in and outside the home, other children, single parenting, lack of food security, and so forth), it is more difficult for the caregiver to provide appropriate care. Nonetheless, in the best of all possible worlds, a key characteristic of a good care provider is her/his ability to be responsive to the child's behaviour. This responsiveness takes several forms and includes: awareness of and ability to respond to the child's developmental cues; the kind of attention, affection, and involvement provided; support for the child's exploration, autonomy, and learning; and protection from abuse.

The ability to respond to developmental milestones and cues. This includes the extent to which caregivers are aware of their children's signals and needs, interpret them accurately, and respond to them promptly, appropriately, and consistently. (Engle and Ricciuti 1995)

The kind of response that is most appropriate will change in relation to the child's developmental stage. For example, the way in which a caregiver responds when a child cries or fusses will depend on the age of the child. For a very young child, the response to fussing may be touching and holding, whereas for an older child, it could involve soothing or redirecting the child's attention through talking. If the caregiver misinterprets the reason for the crying, the child's needs may not be met.

Another example of the importance of an appropriate response is provided by Engle, Lhotska, and Armstrong (1997), who explain that in relation to feeding, "care that is appropriate at one age may not be appropriate at another age. For example, regular mealtimes are probably helpful in the second or third years of life but scheduled times for breastfeeding during the first year usually lessen intake or shorten breastfeeding duration. Active spooning of food is appropriate for a seven-month-old but inappropriate for a normal two-year-old who wants to feed himself." (8)

Responsiveness is also important for language development. Even before they can talk, children understand simple adult speech, and can learn the give and take of conversation. Caregivers who talk to their children in simple language, and respond to children's verbal play, will help their children learn language, thereby facilitating their children's ability to express themselves.

Parents' beliefs about the age at which children can see and hear and learn important skills, like walking or speaking, also affect the child's development. Parents who expect earlier development are likely to support the development of the skills or ability (e.g., give their child things to look at, encourage skills at appropriate times). Thus, helping parents to be aware of developmental stages can have positive effects on children's development. Within each culture there are developmental landmarks. It is important to have an understanding of these and then relate them to other landmarks that we want parents to be aware of for the child.

One of the most common indicators that a child is not developing well is listlessness, low activity level, or delayed achievement of developmental milestones.

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Helping parents to be aware of children's developmental stages includes understanding the different landmarks within each culture.

An alert caregiver will be able to notice this problem, and try to encourage the child more or find out the reason for the low activity, which is often a result of illness or poor nutrition.

The kind and level of attention, affection, and involvement. The attention, affection, and involvement that caregivers show to children influence the child's growth and development. Caring about children's well-being on a day-to-day basis, and taking appropriate actions for children's benefit, are ways in which caregivers show attention and involvement. Affection can be shown by physical, visual, and verbal contact with children. The way affection is expressed will vary by culture. As noted by Engle, Lhotska, and Armstrong, "Holding and carrying a child is a good way to provide love to a young infant, but as children get older, they profit from stories, games, and play with family members as well. Warmth and affection from caregivers are important at all ages." (1997, 8)

The encouragement of autonomy, exploration, and learning. Caregivers can improve children's intellectual development and nutritional status by being aware of and supporting children's innate drive or desire to learn. While young children are born with the ability to learn, they need the encouragement and freedom, as well as the appropriate stimulation, to be able to develop that ability. Children learn from games, play, and guided imitation. Caregivers who allow children to play, and who interact with them frequently, can stimulate their cognitive, language, social, and motor development. Several studies in developing countries found that malnourished children who had been given verbal and cognitive stimulation had higher growth rates that those who had not. (e.g., Super et al. 1990) Thus, caregivers need to provide safe conditions for play, to encourage exploration, and to provide learning opportunities in addition to ensuring that children have adequate nutrition. (Engle, Lhotska, and Armstrong 1997)

The prevention of and protection from child abuse and violence. Too often children are exposed to the violence of war or natural disasters, and these experiences can result in stress that can have both psychological and biological effects years later. Abuse of children, in whatever form, produces a vulnerable adult who is likely to repeat the abuse. Children exposed to aggression, and children who have been victimized, are likely to repeat these roles. Thus the prevention of abuse is one form of caring.

In summary, caregivers and children influence each other. Therefore, helping caregivers develop the ability to respond to children's cues may require ensuring that parents also have appropriate supports. The ability to be responsive necessitates having time, and physical and mental health. When caregivers are under stress from having too many responsibilities and insufficient resources, they may be unable to respond appropriately to children. So, while the ultimate goal of parenting programmes is to enhance children's well-being, this cannot be done without taking into consideration the needs of parents and the family as a whole. In the section that follows there is a discussion of the ways in which parent programmes have developed over the years.

Strengthening Care for the Youngest Children through Parent Programmes

As was noted earlier, programmes for children under three years of age are much less well developed than programmes for those who are considered to be of preschool age (children from age three to school entry). The programmes that do exist for the youngest children, offered primarily by the health and social welfare sectors, tend to focus on children's survival, with only minimal regard for child stimulation, and they do not follow a holistic perspective.

During 1997 two important initiatives were developed by the health community in an attempt to provide a more holistic perspective on programming for the youngest child. These include the *Care Initiative* developed by the Nutrition Section within UNICEF (Engle, Lhotska, and Armstrong 1997), and the WHO Division of Child Health and Development initiative to *Promote Healthy Growth and Development*. A further input to the development of holistic programming for the youngest children was an April 1998 meeting on *Integrating Child Development into Nutrition Programmes*, organized by UNICEF, Wye College, and the University of London. This was followed in April 1998 with the annual meeting of the Consultative Group on Early Childhood Care and Development, where the major topic of discussion was programming for children birth-three years of age, with a major emphasis on parent support. Thus, recently, there has been considerable interest in developing the most appropriate programmes for the youngest children and their families.

A key question emerges: What kinds of support do parents and other caregivers of the youngest children require, and how best can that support be provided? While all children need the care described above, the way in which those needs are manifested and the way they are provided for will differ from culture to culture.

The broad objective within parent programmes is to create awareness of the importance of the caregivers' role in supporting children's growth and development, and to strengthen or modify caregivers' attitudes, beliefs, and practices in caring for children. Ultimately these programmes should empower caregivers in ways that will improve their care of and interaction with young children, and enrich the immediate environment within which children live.

It is important to keep in mind that any caring adult can provide parenting, whether or not they are a parent or even a member of the family. As noted by Engle, Lhotska, and Armstrong (1997), "The most important factor in a child's healthy development is to have at least one strong relationship (attachment) with a caring adult who values the well-being of the child. Lack of a consistent caregiver can create additional risks for children." Thus programmes for families, if they are to be effective as a strategy for supporting children at risk, need to be available not only to the child's parents, if they are present, but also to anyone in the community who can or does have an impact on the child's life. This includes child minders, family members, care providers, educators, and community resource people.

Before discussing the specific components of parenting programmes, it is important to clarify some of the terms used to describe and classify these programmes. There are two lines of action which can be taken: *parent education* and *parent support*. There are some significant differences between the two.

Parent education is any training or learning activity provided for parents. While the content of the training may be on parenting (e.g., teaching mothers to understand their infant's development and respond appropriately, suggesting ways for fathers to become more active in the lives of their children, etc.), there can be a whole variety of course content. For example, the content may be focused on providing parents with skills that, while not directly related to parenting, will enhance the parent's ability to parent. This might include giving parents job skills training courses that would enable them to earn more income, which would then provide more resources that can be devoted to children's health and education. Thus *parenting* is only one category of content that can be taught in a parent education course.

Parenting support provides caregivers—parents and non-parental caregivers—with information on how to give children the kinds of parenting they require to maximize their potential—physically, socially, emotionally, intellectually, and spiritually. While parents are most often the recipients of a *parent support* programme, these programmes may well be offered in situations where parents are absent or unavailable. In these instances, support is then provided to those who care for younger children.

While there are some notable parent programmes, within the broader scheme of early childhood programming, parenting support and education as an ECCD strategy is not nearly as well developed as are programmes directed toward children. Nonetheless, there are a variety of strategies that can be used when developing a parent programme, depending on the type of parenting supports that are required. For example,

1. *Where parents are present but need help to do their job more effectively*, strategies for working with them include:

- *home visit programmes;*
- *parent-to-parent skills-sharing programmes;*
- *parent education classes offered through adult education, religious, civic, or community organisations;*
- *community service projects that include adult capacity-building activities;*
- *family therapy or group therapy for parents focused on learning problem-solving skills;*
- *radio programmes and other public education initiatives;*
- *parent involvement components of early childhood programmes that offer significant engagement for and with parents.*

2. *Where the families' ability to parent is disrupted by social conditions, including poverty, war, societal breakdown, or lack of personal resources and supports*, strategies include:

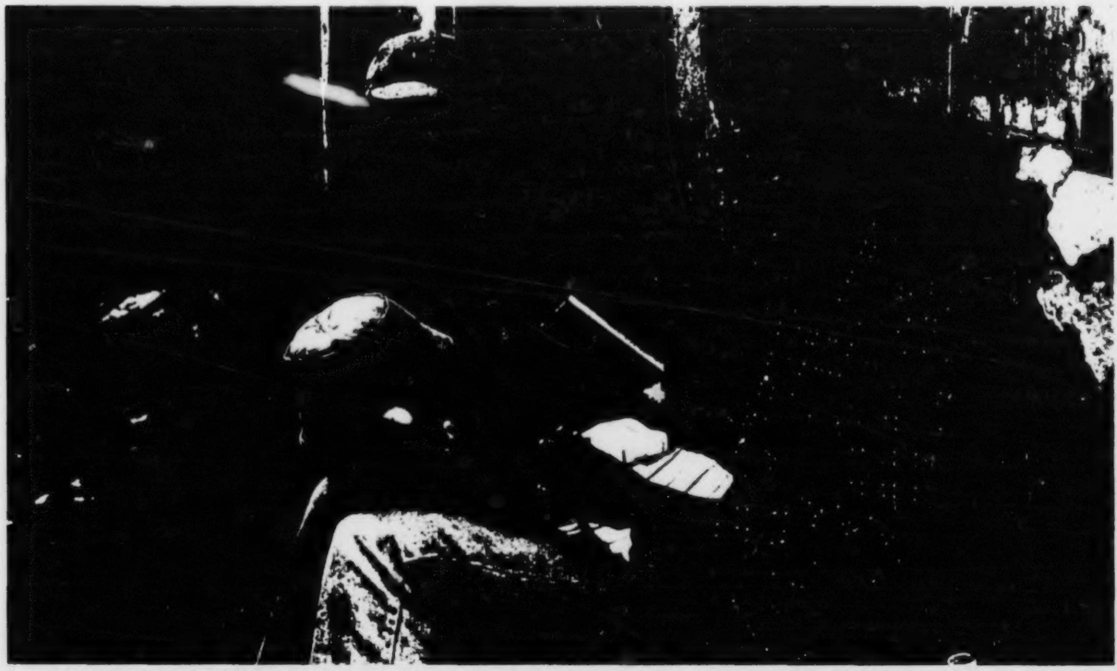
- *multi-dimensional programmes that help parents address their work and family needs (including micro-enterprise programmes coupled with cooperative daycare and parenting education supports);*
- *training for refugee camp workers and other emergency personnel about the ongoing developmental and parenting needs of children;*
- *parenting programmes integrated with food distribution or health services;*
- *community development projects with quality childcare and parent involvement components.*

3. *Where parents are absent or non-existent, and parenting is being undertaken to some degree by grandparents, other children, residential care facilities, etc.*, strategies include:

- *child-to-child programmes that provide supports for children who mind other children;*
- *mentoring and team-building among diverse caregivers and childminders in the child's life;*
- *holistic early childhood care and development programmes that provide high quality integrated care during a significant portion of the child's day;*
- *training for caregivers in parenting skills;*
- *public awareness campaigns and activation of social support groups, such as religious or tribal groups, on behalf of the under-parented children;*
- *"big brother" and foster parenting programmes.*

4. *Where children are not being parented, and are fending for themselves alone or in groups*, strategies include:

- *setting up group homes that are integrated with quality daycare/early childhood programmes (and providing training in parenting to all staff);*
- *training of older street children to "adopt" younger street children and build families;*
- *provision of shelter, food, and other necessities in settings where parental-style care is considered a necessity.*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In order to best meet the needs of children, their families, and their communities, parent support and education programmes need to be holistic in nature.

Components of Parent Programmes

Regardless of the strategy used to reach and work with parents, all strategies consist of several components. These include the content (the curriculum), the structures or vehicles used for reaching parents, the process for conveying the information, a description of who is involved in providing the services, a delineation of costs, and sometimes an evaluation. A description of each of these components is provided, with examples of how they are applied in different programmes.

What is the Content of the Programme?

Programme content differs by the kind of organisation that provides the service and by the particular needs of those being served. While programmes developed by the health sector in the 1970s and 1980s tended to have a single focus, those developed in more recent years are generally more comprehensive in their approach—both in terms of their holistic view of children's development and of their understanding of the need to focus on the whole family within the context of the wider culture. This being said, the specific content of programmes for children under three years of age tends to fall into three categories: health and nutrition, stimulation, and comprehensive or holistic programming.

Health and nutrition. The majority of parent programmes for children birth-three focus on children's survival, health, and nutrition. An example is the maternal and child health project in Cambodia. In this project, the objective is to increase the provision of preventative health education by increasing the role of women and families in primary health care. World Education, a USA-based NGO, trained trainers from Cambodia to work with local villagers. The training of villagers was done through participatory, non-formal education methodologies that value the capacities of individuals to grow, to learn, and to contribute responsibly. Mothers were the primary targets in this project. Participants received lessons on personal hygiene, birth spacing, feeding practices during childhood diarrhoea, immunizations, and the prevention of malaria.

Another programme that focuses almost exclusively on health messages is the *Posyandu* programme in Indonesia. *Posyandu* stands for "health services for mothers and children." This service is designed to reach pregnant women and children birth-three years old. The *Posyandu* is essentially the placement of a health station in each village. While this station may be situated within a health facility, it may also take place in a home. Volunteers from the community are trained to provide the services. (More is said about this programme on page 24.)

While the health programmes in Cambodia and Indonesia seem to be working toward their objectives, increasingly within ECCD programmes there is an emphasis on moving beyond survival messages in parent education programmes to including both information and a focus on care and stimulation. This is the result of extensive experience and research, which have demonstrated that feeding a poorly nourished child is necessary, but not sufficient, to optimise the child's development. Research demonstrates that feeding and growth-monitoring programmes, while often meeting their important goal of child survival, have, by and large, not been able to protect poorly nourished children from long-term cognitive and behavioural deficits. However, when psychomotor stimulation components are added to existing growth monitoring programmes, gains are made in developmental quotients. (Engle, Lhotska, and Armstrong 1997)

Stimulation. There are a few programmes for infants and very young children that have put an emphasis on stimulating the child's intellectual development. For example, at one point in time there was a Ministry of Intelligence in Venezuela. In 1980, the ministry began Proyecto Familia, a programme intended to promote the intellectual development of children from birth to six years of age by providing informal education to mothers, both through direct contact and through the mass media. The focus of the content was on providing children with stimulation designed to develop their thinking and problem-solving abilities.

With somewhat the same goals, a Mental Feeding Programme was initiated by the Nutrition Centre of the Philippines in 1976. There were three major components within this programme: service, research, and training. The service component started with a programme for parents and children offered through the Health Centres; these were set up and operated by the Department of Health. Then the programme was expanded to include an inter-agency effort that involved the Department of Social Welfare and Development, the Department of Education, the Department of Health, the Bureau of Agricultural Extension, and the Child Development Centre of the University of the Philippines. Within the Mental Feeding Programme, brochures and books for parents of infants and very young children were developed. In the 1980s this material was used widely, but by the 1990s the availability and promotion of the materials decreased. Some of this material is now being revived in the National ECD Programme currently underway in the Philippines.

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Beyond child survival: focusing on care and stimulation

Comprehensive (child plus family). The content within recently developed programmes, and those programmes that are outside the health sector, is frequently comprehensive in the sense that it includes information on child health, nutrition, and development, as well as strategies that parents can use to help promote that development. The programme also provides supports to parents as people. In other words, topics and discussions address the needs of the whole family, and sometimes the community. Some parent programmes are connected to income-generating activities and/or community development projects.

In the Philippines during the late 1970s, a study identified the lack of parental knowledge about proper childcare as a major contributing factor to the poor health, nutrition, and developmental status of Filipino children. In response to this, in 1978, a parent education programme called the Parent Effectiveness Service (PES), was developed within the Social Welfare Project of the Department of Social Welfare and Development (DSWD).

To determine the specific needs to be addressed through a parent education programme, parent congresses were organized at the municipal, regional, and national levels with representatives from neighbourhood parent effectiveness assemblies (NPEA) as participants. Parental needs in terms of parent education were also assessed through village-level consultations. Once the results of the consultations were in, the PES programme was designed and pilot tested. When it began in 1979, the programme was delivered through home-based early childhood care and development (ECCD) programmes, focusing primarily on the needs of birth-three year olds who are not served by centre-based programmes, such as the day care service. *A Handbook on Parent Effectiveness Service* (1991) was developed as a manual to guide social workers in implementing the parent education programme. The manual provides the basic content and methods for the parent education programme. The curriculum is delivered through trained peers, and there is opportunity to add more individual content.

The strengths of the PES are that the curriculum provides comprehensive content (health, nutrition, parenting, family life, stimulation), is able to reach rural populations, and has developed a good network of parents.

From its modest beginnings, the PES has grown considerably. Within two years after implementation, PES was operating in 120 municipalities in fourteen regions of the country. By 1991, 143,000 parents were served, and in 1992, 160,000 parents in 1,500 municipalities throughout fourteen regions of the country were being reached. A total of 192,146 children were reported to be reached through the programme by 1992. (Angeles-Bautista 1996)

On the other side of the world, in the Rural Toddlers programme in Brazil, in addition to the standard child development topics, the training of mothers and community leaders includes a learning through play curriculum for children from birth to three years of age that is built on an understanding of the kinds of activities and interactions that foster resilience in children. The specific topics covered in the training provided for mothers and fathers are: ECD, community psychology, children's and parents' resilience, the production of toys; library activities involving toys and pedagogical games are also included.

Curriculum and materials for children. Creating materials which help stimulate parents to focus on their child's development is an activity within many parent programmes. There are several levels at which materials have been developed. For the youngest children, the materials consist of baby books that mothers can fill in to mark the children's development on a variety of dimensions. For example, within the Al-Tufala programme in Nazareth they have created a baby book that is presented from the child's perspective, with the "child" describing what he/she needs and what parents can do to meet those needs. They have also produced a tape of songs (using traditional tunes with new messages) and games.

A similar approach was taken in Colombia, where the baby book contains messages from the baby to the mother about developmental accomplishments and the need, at particular times, for health check-ups, immunizations, etc. The book covers the first two years of a child's life and provides a personal record for the child, at the same time educating the caregivers and serving as a basis for discussion at meetings. (Koh 1989)

The curriculum for the Pandai Project in Indonesia also contains materials that help parents focus on the child's developmental status. This is done primarily through a developmental checklist spanning years one through four. To stimulate the mother's interaction with the child, 150 cartoon format activity cards and supplemental materials (paper puzzles, matching games, picture books showing village children in their daily activities) have been developed. A toy-making manual for use with groups of parents has also been produced. These activities have been developed from low-cost items available in any village or urban environment. Supportive materials are written at a third grade literacy level, supplemented by cartoons and storybooks for the illiterate. (Satoto and Donohue-Colletta 1989)

In cases where the children are older (age three and above), there are parent programmes that provide "worksheets" for parents to use with their child. An example comes from the Padres y Hijos programme in Chile. One of the project's components are parent group meetings where there is a discussion of activities that parents can undertake with their children between meetings. To reinforce the ideas that are presented, worksheets are distributed. These worksheets are designed to enhance perception, thinking skills, use of symbols, creativity, curiosity, and the motivation to learn. Parents go over the materials during their meeting, then take the worksheets home for the children to complete. The worksheets are then taken back to the next weekly meeting.

The Curriculum Development and Delivery Process

Whether the curriculum has a health and nutrition focus, a stimulation focus, or a focus which is more comprehensive, someone has to create the curriculum, and then a strategy has to be developed for delivering the curriculum. While there is clearly a strong relationship between who develops the curriculum and the methodology used in delivering the curriculum (which involves who works with parents and how they do so), there is not always a one-to-one correlation between the two. So, it is useful to discuss them separately. In general, however, there is a clear link between how the curricula are developed and how they are delivered, and how that impacts the ways in which parents work with children. A top-down curriculum development process is generally delivered through systems where parents are told what they need to know. In turn, parents are then supposed to "tell" their children what they need to know. On the other hand, curriculum models generated with the community tend to deliver messages through discussions and participation, and the expectations are that parents will work with their children to support exploration, problem solving, and self-discovery.

How is the Curriculum Developed?

Historically, professionals from the fields of health, nutrition, developmental psychology, and education have been the ones to determine what the curriculum should be within parent education and support programmes, based on the expertise developed in their respective sectors. Over time, this method of determining curriculum shifted to an approach where, while the professionals were still in control of the curriculum, local adaptations were seen as appropriate. So additional material was inserted to reflect the culture, and/or examples were taken from the setting where the curriculum was being implemented. More recently, and still quite experimentally, the curriculum is being co-generated by the professionals and community members. Examples of these approaches follow.

■ By professionals, based mostly on information that is thought to be universal.

The development of the curriculum by professionals has been the primary approach of people in the health sector, where very basic health messages are assumed to be of such universal significance that they can be promoted without a great deal of consideration for the cultural context. However, as the health sector has realized, even these most basic messages are much more likely to be accepted when they are linked to current childrearing practices.

Within the extensive system of Parent Schools in China, there is a centrally derived curriculum. The All China Women's Federation has taken the initiative in the development of the educational content. While the curriculum varies somewhat from place to place, based on local needs and resources, the basic content is consistent throughout the country. The topics, and how they are treated, are determined by the findings of an intersectoral group (health, nutrition, child development, and education) brought together to examine existing research and to define needs of parents and children, and from the knowledge gathered, to develop the curriculum.

Another nationwide programme where professionals create the curriculum is in Japan, where the Ministry of Education, Science, and Culture is involved in parental education. Under the auspices of a Board of Education, many communities give lectures on home education (usually once a week for one year). Through these lectures, parents acquire a basic knowledge of child development and of the role of home education. (Woodill, Bernhard, and Prochner 1992)

As the content of parent education and parent support programmes has broadened out to encompass a wider range of topics where there are no straightforward right or wrong answers, the approach to curriculum development has had to be rethought.

■ By outsiders (professionals) with some local adaptation.

In recognition of the fact that culture is important, another approach to curriculum development has been for professionals to take the lead in creating the materials while making a very conscious attempt to adapt the curriculum to local needs and to use local resources to implement the curriculum. For example, in a health programme that is trying to educate parents about how to treat instances of diarrhoea, the basic message is that children need to continue to be fed and they need to be given liquids so that they do not become dehydrated. The initial approach to getting this message across was to distribute Oral Rehydration packets (ORT) that contained an appropriate mixture of sugar and salt that could be added to boiled water and fed to the child. This approach was only moderately successful, since there were considerable difficulties in distributing the packets, and access to boiled water is extremely limited in many settings.

So new strategies were developed. The basic message was still the same—keep feeding children and do not let them become dehydrated. The approach to hydration was different, however. People were told to put a locally understood measure of salt and a locally understood measure of sugar in water and give this to the child. The appropriate measurement of salt and sugar was still a problem. Thus in more recent campaigns, attempts are made to identify local foods that will help alleviate dehydration, and parents are encouraged to feed these to their children when children have diarrhoea. This appears to be a much more successful approach.

In terms of parent programmes with a more comprehensive curriculum, there is also a need to build on what exists. An early evaluation of the Parent Effectiveness Service (PES) suggested that there were components within the programme that needed to be strengthened. These included the fact that too much of the content was prescribed. The recommendation was made that there be room for more local adaptation. Related to this was the recommendation that parents be more actively involved in setting the agenda. (Angeles-Bautista 1996) Thus the parenting curriculum has evolved to include more local input.

Another curriculum that has been created by professionals with local input has been developed by the Child Development Unit in Bangladesh. The materials are the outcome of an intensive period of development over a period of three years. The materials were originally designed as a way to deliver the UNICEF-developed "Facts for Life" child development messages in culturally appropriate ways. The resulting curriculum incorporates many traditional religious stories (both Moslem and Hindu), rhymes, songs, beliefs, and practices.

As a result of a reflective methodology that emphasizes a process-oriented, open-ended approach that builds on the participants' own ideas and experiences, the parenting materials that have been developed by the Child Development Unit are in the process of being reworked to incorporate what has been learned through work with the community. (Arnold 1998b)

In summary, one way to adapt the curriculum to the local setting is to identify local rhymes, songs, festivals, etc. that are a part of the culture and then build these into the curriculum. This approach basically says that there is a body of information we want to give people, and we will illustrate it by linking it to local cultural practices. A slightly different approach is to build the curriculum from observations of people's daily routines, and then to link these routines to child development theory.

■ By outsiders, based on observation of daily life.

An example of creating a curriculum based on observation comes from Sri Lanka, where a research study undertaken in the country let programme planners know that there was a lack of awareness among parents, particularly among those parents in rural areas, of the importance of their role in supporting their child's development. A further discovery from the survey was that there were no existing services in the region to reach families through which a parent education programme could be offered. So, a home visiting programme was chosen as an appropriate vehicle to reach those most in need in order to strengthen parental skills. It was argued that home visiting would optimise the use of the home and the immediate environment as the primary source of learning and development before school age. Specifically, the home-based programme was designed to train parents to:

- *Be aware of developmental stages and recognize them in the child;*
- *Identify learning situations at home through daily activities;*
- *Recognize the human and material resources in the home environment;*
- *Stimulate children while attending to daily work;*
- *Recognize the difference in children's development over time.*

To develop the curriculum, visits were made to homes, and observations were made of the kinds of activities that adults and children were engaged in throughout the day. The researchers got parents to talk about their children, to describe what they were like and what they could do. This stimulated parents to pay more attention to what their children were doing and got them involved in what their children were learning.

The resulting curriculum is based entirely on household activities and on the use of real objects in real situations. A series of eight activity books were created to share with parents. Since most parents can read and write, they are given the materials directly by the home visitor and/or in parent groups. Within each activity book there are several sub-topics, and within each of these topics there are six specific activities that can be undertaken with children. Some of the activities are for children under three years of age and the others are for children over three.

The activity books include pictures of common activities and a simple explanation of what the child learns while undertaking a given task. For example, parents are told that an activity like cooking involves the development of estimating skills. Knowing how much rice to use to feed the family and pouring enough water to cook the rice requires both estimation and eye/hand coordination skills. The task of preparing the rice for cooking—removing seeds, washing the rice, separating out bad kernels—develops small motor skills and coordination. The same is true for other tasks as well. For example, threading a needle is useful in the development of small-motor skills and eye-hand coordination. The activity books also suggest ways parents (fathers and mothers) can stimulate problem-solving skills and encourage the use of language while involved in the tasks.

In essence, the curriculum reinforces the value of what people are already doing with their children. Parents see how what they do on a daily basis helps their children to acquire skills and knowledge.

A related strategy is to identify parents from within the community who represent "positive deviance" (i.e., they deviate from the norm, but their deviation has a positive impact on children.) Since these parents are able to provide children with appropriate supports, even in conditions of risk, the strategy is to try and discover what it is that these parents are doing well, and then support similar kinds of activities on a community-wide basis.

■ By outsiders based on childrearing studies.

Observation studies of what is happening in a culture provide the outsider with some clues as to how to link new information to current practices, but another level of understanding is required if parenting programmes are going to have an impact on attitudes and beliefs. Childrearing studies have proven to be a useful vehicle for trying to understand attitudes and beliefs, and for enhancing our ability to develop ways of working with parents that build on existing strengths. Today there are many people who are seeking to build on the strengths found within a given culture through childrearing studies, and then to introduce other information as gaps are identified.

During the 1990s, a series of childrearing studies were begun. The Consultative Group on Early Childhood Care and Development conducted a survey of childrearing studies undertaken in Latin America (Myers 1992) and in Africa (Evans 1994), and then later supported childrearing studies in Morocco, Mali, Bolivia, Indonesia, and India. (Evans 1997) In addition, an extensive study was undertaken in Lao PDR in 1996 (Phanjaruniti 1996), and such studies are currently underway in Nepal (1998) and are planned for other parts of Asia in the coming years. In essence, childrearing studies "aim to combine a developmental psychology perspective with a cultural anthropological approach, valuing both." (Arnold 1997a)

An example of a childrearing study that led to the development of an integrated programme that addresses health, nutrition, and stimulation in a parenting curriculum comes from the Pandai Project in Indonesia. (PANDAI is at once an acronym for words meaning child development and mother's care, and an Indonesian word that means "clever" or "smart.").

Rather than adopting a Western model of intervention, the Pandai Project is based on a study of the caregiving correlates of optimal child development within villages in Central Java. (Satoto and Donohue-Colletta 1989) The research on Indonesian childrearing pointed to a number of practices that were detrimental to the health and/or the overall development of children, and it identified some traditional practices that were positive and needed to be reinforced. The information generated was used to develop a home-visiting curriculum with messages targeted at specific patterns of adaptive caregiver-child interaction.

■ Through a generative process.

When childrearing studies are done with the people whose practices and beliefs are also being studied, the results can be used as the basis for the development of a co-generative approach to parenting programmes and other ECD interventions. But this does not always happen.

Arnold notes that a wide range of parent education programmes have been developed around the world that tend to disregard parents' and caregivers' knowledge and achievements, even though observations and/or childrearing studies have been conducted. In these programmes, people other than a child's parents determine what children need and then they "educate" parents about what the parents should (or should not) be doing. Arnold argues for a shift in perspective and suggests that programmes for parents should be developed with parents through a dialogue that "respects different views and allows different voices to be heard—valuing diversity and with an openness to creating new knowledge and new ideas." (Arnold 1998a, 1) This open dialogue would result in a generative curriculum—one that is created out of genuine interaction with those for whom the curriculum would be created. Arnold explains the generative process as the "pooling of knowledge bases, with both being regarded as valid, followed by dialogue in which new knowledge and ideas may be created, with all involved learning along the way." (6)

In engaging in dialogue, however, at some point there is going to be a conflict between the practices and beliefs that are identified through childrearing studies, and the beliefs and practices that are introduced by outsiders, who see some of the traditional

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A generative curriculum, created out of a genuine interaction with those for whom the curriculum is developed, is ideal, but unfortunately not common.

beliefs and practices as being harmful to the child's development. When that happens, decisions have to be made as to how this conflict will be addressed.

At this point in time there are no examples of truly generative curriculum for parents with young children.

In summary, curriculum for parent education programmes comes from a variety of sources. It can be packaged by professionals who have little or no knowledge of the cultures within which the materials will be used. But fortunately this method of curriculum development is fading. There is increasing recognition of the fact that what exists locally is often as good as (and sometimes better than) what might be introduced from outside. Even if this were not necessarily so, there is recognition of the fact that if you are going to change people's behaviour, you have to respect who they are and what they do before they are going to be open to learning something new from you. These two factors—the value of many traditional practices and beliefs and the need to respect those with whom we work—are increasingly at the foundation of curriculum development work within many ECCD programmes today.

How is the Curriculum Delivered?

No matter where the curriculum comes from, there needs to be a strategy for delivering the curriculum to those we want to reach. A range of agencies and organisations (NGOs, church groups, and community development organisations), as well as government ministries, offer parent programmes, and families can be reached through various means. This can include one-on-one contact either in the home or in a clinic, or through a social service. There are also parent groups, both formal and informal, and there are programmes that attempt to reach families via mass media. The method of delivery is related to the ease of access to families and the content to be conveyed. For example, home visits are more common in stimulation programmes but less common in growth monitoring projects, where parents are encouraged to bring their child to a clinic. What follows is a discussion of the various strategies for reaching parents, with some programme examples to illustrate how the strategies are being implemented.

Within the various delivery systems, there are different methodologies employed to convey messages to parents, and these are generally closely linked to the type of people who are generally responsible for developing and delivering the messages. The ways of conveying messages can be grouped into *Telling people what to do*, *Modeling positive behaviour*, and *Engaging people in dialogue*. Those that deliver the messages range from professionals to volunteers.

■ Telling people what to do

Many proponents of parent education courses state that formal courses offer the best option for raising the qualitative and educational level of the parents. Within these programmes, parents attend organized lectures where, using a didactic format, a specialist instructs family members on how to provide for the young child's health, nutrition, cognitive, and/or psychosocial needs. There is little or no time for discussion and/or exchange among parents. China's Parent Schools are a good illustration of this form of parent education.

Traditionally, China has placed an emphasis on early childhood education and the importance of family education. However, it was not until the early 1980s that the concept of parent schools was formalized. These schools' popularity comes out of concern about how to address the needs of children in the one-child family, and are designed to provide parents with appropriate information at each stage of a child's life—from birth onwards. Parent schools link school, family, and community. Their fundamental task is to improve the educational level and qualifications of parents, and through parents to promote literacy and the education of children. The schools help parents to understand their role as educators, to gain instructional skills, and to interact with their children with sensitivity and confidence.

There are four types of parent schools. They differ by the organizing unit. There are: 1) Community based schools that focus on improving the quality of parenting and the home environment. 2) Government schools or departments of education that function as supplements to the children's schools and are coordinated with the children's education. 3) Other social group schools that work with parents, such as hospitals, pregnancy and childbirth schools, schools for prospective parents, and parenthood schools for couples with newborn babies and preschool children. 4) Institutions for parent education research that focus on researching questions which arise while parents educate their children. While these institutions take responsibility for organizing the programmes, they are helped by the All-China Women's Federation (ACWF), which has taken the lead in mobilizing communities to establish the parent programmes.

Instruction in the schools varies, but typically includes classroom teaching (e.g., regular classes and lectures), expert consultation, long-distance correspondence courses (e.g., radio, TV), and informal group discussions. Lectures are given by specialists or staff from the local institution. They provide up to eight sessions for parents over a term.

In support of, and sometimes in addition to, the local curriculum and materials, general materials related to child development are provided by the Women' Federation. Topics included in lectures and discussions vary according to the age of the parents' children (e.g., kindergarten parents learn games for early intellectual development, high school parents focus on college entrance exams). Participants are given a parenting education certificate if they have participated in all or most of the meetings. In 1995 there were 240,000 parent education schools across China. (Baolan and Xiaoping 1995)

In the Chinese approach to parent education, the assumption is that parents are ignorant about their children and need to be enlightened. This deficit model (parents are lacking knowledge and/or skill) has been accompanied by a "didactic model" that has assumed that if we just tell parents what they need to know, they will do a better job with their children. This has not always worked, so alternative approaches have been developed.

■ Showing/Modeling positive behaviour

This strategy involves having a trained teacher/facilitator demonstrate ways parents can support children's learning. This is a frequently used approach in home visiting programmes. The most common format is for the home visit to focus on the child's development and to discuss and demonstrate the ways caregivers can promote that development, providing developmentally appropriate activities that parents can do with the child. As in the "telling" model, the home visitor is the one with the knowledge and the parent is the receiver of the knowledge.

■ Engaging people in dialogue

Programmes that "engage" parents shift the power and control between the parent and service delivered. Here the emphasis is on working with parents and building on their knowledge and skills. It acknowledges and uses parental strengths as the basis for programming. It can begin very simply.

> *"We need to both understand the process of socialization within a particular culture and learn to fashion our child development agenda so that it is complementary to this."*
> *Arnold (1998a, 2)*

As Engle, Lhotska, and Armstrong (1997) note, "Parents may not be aware of all of the different activities which they are already doing to support their children's development; they may think that they are just 'watching children grow'." What parents observe when they "watch" and what they conclude as a result of their watching can become the basis for building a programme.

It needs to be noted, however, that parents can be engaged in a discussion of parenting, even when the curriculum is basically pre-determined. The facilitator can present materials for discussion, rather than presenting "facts". He/she can ask questions to which there are not necessarily right or wrong answers. A good facilitator can stimulate parents to ask their own questions, and encourage active exchanges among parents as a part of the process of introducing new material.

Who Delivers the Service?

As noted, when professionals have developed the curriculum, the professionals are usually drawn on to deliver the service. At least this is true when programmes are in a pilot or small-scale phase of development. As programmes attempt to achieve greater coverage, and/or when the programme is attempting to reach isolated families, then the person who delivers the service is much more likely to be someone who is local, and who is trained to work with parents.

An example of a shift in personnel over time comes from Jamaica, where in 1971, it first began experimenting with home visiting. In the first programme, a nurse was the home visitor and worked specifically with families of children who were recovering from severe malnutrition. When the programme was replicated with a harder to reach population, someone closer to the community worked with the families. Community health aides, who already visited homes regularly under the primary health care programme, were given additional training to be able to work with the kinds of families originally visited by trained nurses. (Grantham-McGregor et al. 1997)

Another example of parent programmes where there has been a shift in providers over time comes from the Philippines, which has a long history of parenting programmes. Among the early programmes that were specifically addressed to parents on a large scale through government-assisted programmes were health and nutrition classes for mothers conducted through the Rural Improvement Clubs (organized in 1934). The Bureau of Agricultural Extension (BAEx) under the then Department of Agriculture sent extension workers to rural areas to work with families of farmers. The Home Economics Division of the BAEx coordinated the classes for mothers, which covered home management, nutrition, and child development. In the 1970s up to the early 1980s, extension workers also conducted health and nutrition classes for mothers in the rural areas.

Within the First Country Programme of Cooperation (CPC I) between UNICEF and the Government of the Philippines from 1979 up to 1983, the Under-Six Clinic Programme concentrated on the training of *doctors and midwives* at the national and regional levels. This was part of the broader WHO-UNICEF effort to assist in building and strengthening the infrastructure for immunization at the national levels. In CPC II, from 1984–1988, when the programme was expanded, training programmes were addressed to *midwives and mothers*. In 1986, training for mothers in especially depressed and neglected provinces was undertaken. Training modules for *mothers* were developed, and midwives were provided with supervisory training to help them sustain the participation of mothers in the Under-Six clinics. Logistical support and supplies were provided in the form of micronutrients, growth charts and weighing scales. (Angeles-Bautista 1996)

Thus, as programmes evolve there may be significant changes in who actually delivers services to the family. However, some programmes begin with one level of personnel, and this type of service deliverer is maintained over time. What follows is a brief description of some of most typical groups of people who are responsible for programme implementation.

■ Professionals

The programmes in China and Japan noted above are staffed by professionals, as are most of the parent programmes in resource-rich countries. Although even when professionals are available, peers are sometimes chosen to deliver services.

■ Trained outsider/facilitator

Those programmes that do not use professionals to deliver the service frequently employ facilitators/trainers from outside the community who generally have higher levels of basic education than the population with whom they are working. For example, the Child Development Unit in Dhaka, Bangladesh has created a parent support programme that is being implemented in both rural and urban areas. The Unit has produced a training module that contains fifteen sessions spread over nine units, and a set of facilitation guidelines. A facilitator, who is employed by the organisation implementing the programme, then leads a series of sessions attended by parents/caregivers, who meet in groups of twenty to twenty-two women. The facilitator travels among the villages where he/she works, but is not a part of the local community.

■ Trained local facilitators

Rather than bring people in from the outside to provide parent support and education, another approach is to train those who live in the community to deliver services to other families within their village or region. An example comes from Mexico.

In 1982, the Secretary of Public Education in Mexico launched a national programme of non-formal parent and community education. The programme is oriented toward low-income families with children zero to four years of age, residing in poor rural and urban marginal communities. Its objective is to educate and to empower parents with information in order to improve their care of, and interaction with, their young children.

The Mexican programme rests upon a system of successive training in which professionals contracted by the central government work together with state personnel to train supervisors who, in turn, train up to ten supervisors, who then train and supervise up to ten local promoters or community educators. The community educator works with groups of twenty parents, organizing a group orientation at the outset and forty group meetings over the course of a year, during which parents discuss ideas presented in a Parents' Guide. Group meetings are backed by periodic home visits.

Community Educators are generally young parents or health care providers who live in the community. Their training consists of a two-week, pre-service training course on the topics of child development, positive parenting practices, nutrition, basic health and hygiene, and family planning, plus monthly review sessions. The project has provided jobs for 12,000 community educators, who receive a monthly stipend. (Myers 1996)

On the average, this programme has reached about 200,000 children each year through their parents. At present, an expansion in the programme is underway in which the goal is to reach 1,200,000 children in the ten poorest states of Mexico. This is being done under a new administrative arrangement in which the execution of the programme has been transferred to the state level as part of a general decentralization process, while supervision, coordination, and technical support is provided from the National Council for Promoting Education (CONAFE). Because this effort to go to scale is only now getting underway, an evaluation of the enlarged programme and its effectiveness has not been carried out. (Myers 1996)

■ Trained volunteers from the community

Not all programmes pay those who deliver services. In fact, the vast majority of large-scale programmes, and even some pilot efforts, use volunteers from the community to staff their programme. This is usually done as a cost-saving device, although it is frequently presented as a way for people to make a contribution to the well-being of the community.

Examples of this approach abound. One of the largest programmes, however, is the *Posyandu* health centres in Indonesia. The person who operates the *Posyandu* is a trained volunteer (Kader) from the community, who works part-time. Within Indonesia there is a strong tradition of volunteering, linked to a nationally-based, highly structured social system. Thus it is not difficult to identify volunteers, and within the *Posyandu* system, many of the women maintain their position for many years.

Another example of the use of trained volunteers come from the *Tapunacuy* project in Peru. The focus of this project is on enhancing the health and developmental status of young Quechua children (birth-seven) living in rural areas in the Department of Apurimac. One of the activities within the *Tapunacuy* project is to train volunteer mothers in basic health, nutrition, and early childhood issues. Once they receive training, these women work in pairs to facilitate parent education discussions within Mothers' Clubs that are already established in the region.

In summary, the kind of content that is developed and who delivers it vary across programmes. At times, professionals develop the curriculum and it is delivered by professionals through lessons, modules, and demonstration. At other times, the curriculum is based more on what is already happening within a community. In these instances, local people are much more likely to be the ones who are involved in delivering the curriculum. As noted, however, there is a not necessarily a one-to-one correspondence between how the curriculum is developed and how it is delivered.

Furthermore, programmes can begin with one curriculum development and delivery approach and, over time, evolve into something quite different. Thus something that outsiders may judge as inappropriate when a programme begins can become something that is highly successful over time. For example, modules designed by professionals from outside the community, if delivered in a participatory format, can result in parent empowerment. Likewise, approaches that from the beginning show promise of truly building on community strengths can evolve into something far more didactic. For example, materials which are developed through engaging parents in the process of curriculum development may be introduced as course materials elsewhere. Thus we need to be cautious in judging the value of a curriculum and pedagogical approach at a given point in time.

The choice of who delivers the curriculum is highly dependent on whom the programme seeks to serve, and the kind of people who are available to deliver the content, regardless of who develops the curriculum and the method used in doing so. Regardless of who is chosen to deliver the messages, there needs to be a vehicle for working with parents. In the next section, there is a discussion of a ways of reaching parents.

How Do We Reach Parents and Caregivers?

There are multiple ways to reach parents and primary caregivers. For example, parent education and support can be delivered through one-to-one interaction. Parents can also come together in groups for the explicit purpose of receiving parenting support, and parenting messages can be delivered through services that already exist. More general community development programmes can also provide indirect support for parents. Community development programmes are seen as appropriate ECD approaches, based on the assumption that by enhancing the environment as a whole there will be positive benefits for families and children. There are one-on-one approaches at one end of a programmatic continuum, with community development efforts at the other end.

The discussion below presents parent programmes along a continuum from most intensive contact to more indirect services.

■ Parent support in the home: home visiting

One of the most intensive ways to work with families is through visits to the home by a trained home visitor. A home visit addresses the issue of care for the child within the child's natural context and underscores the importance of the caregivers' role in supporting the child's development. Furthermore, home visits are designed to help parents/caregivers to feel more at ease in expressing their views.

Home visits are frequently used as a way of serving hard-to-reach families. This approach is used in situations where families are isolated and unlikely to participate in a parent group or to avail themselves of services offered within the community (e.g., a health clinic).

Home visitors are frequently recruited from the population being served by the programme. With appropriate support and training, they can provide very effective services that lead to both increased parental support of children's development and enhancement of the mother's self-concept.

As noted, one of the first home visit experiments was conducted in Jamaica in 1971 in which a nurse was hired to visit families for an hour a week over eight months. During the home visit, mothers were shown how to play and interact with their children in a way that would promote positive development. Every week a toy and book were demonstrated to the mothers and left in the home; these were then rotated among participating families. When the children were evaluated and compared with a control group, developmental results for the visited children were found to be significant, but the cost of the intervention was judged to be too high to be sustained. (Koh 1989)

A second experiment was created to see whether developmental gains made when children from very poor families were recovering from severe malnutrition could be sustained through home visits. People currently involved in home visiting under the primary health care programme were given training to provide support to parents of children who had been hospitalised for malnutrition. Children who were visited at home continued to show relative and gradual improvement for the year during which the visits were made and for a twenty-four month period thereafter. During a follow-up (less expensive) programme, a developmental stimulation component was added to the usual health and nutritional home visits by community health aides, who had been given additional training. A study of the alternative model suggested that home visits every two weeks were effective but became less effective when they were made only once a month. Thus, the recommendation was made that to be most effective, home visits needed to be made weekly. (Grantham-McGregor et al. 1997)

The home visiting programmes have been relatively small-scale in Jamaica. In Mexico, however, the Ministry of Education has created a large-scale home visiting programme. In cooperation with UNESCO, UNDP, UNICEF and the World Bank, a five-year Initial Education Project was launched to enhance the early experiences of Mexico's poorest children under the age of three.

The project is designed to reach urban marginal, rural, and indigenous communities. In general, these communities are too poor to be able to afford to send their children to the formal preschools. Within the programme, community educators visit parents in their homes once a week, teaching them how to care for and stimulate their young children in order to promote the child's cognitive and psychosocial development. In addition, home visitors introduce a series of exercises for parents to use with their child. Community educators also organize group forums.

Responses to the project have been enthusiastic. The coordination of health and education services has gone well, despite the fact that two different ministries oversee services, and that the original project did not include a health component. Community educators and local health committees frequently conduct joint meetings with community participants to discuss child care and development issues. Parents report that the training has changed some of their traditional attitudes about child rearing. In some areas the programme is also changing ideas about gender roles in child rearing. In remote villages in Chiapas, for example, it is the fathers who attend the training sessions. (Myers 1996)

Meanwhile, Jamaica continues to experiment with home visiting. In 1997 the Jamaican government initiated a new home-visiting programme. The project involves the training of community-level home visitors to provide child care/stimulation messages to parents. Poverty eradication funds were used to facilitate recruitment, training, and supervision of teams of four people from selected very poor communities within each of the fifteen Kingston/St.Andrew political constituencies. One year into the programme, an evaluation was conducted. (Brown and Williams 1998) At that point, some positive outcomes of the project were already identifiable, and issues that were yet to be addressed were noted.

Positive outcomes included the fact that:

- Promoters (those who work with the families) benefit considerably from being involved in the programme; they gain respect within the community and have expanded employment options.
- Parents recognize that their children have abilities.

Issues that need to be addressed include:

- There is a lack of clarity about the qualities one seeks in home visitors. What appears to be necessary is that the candidate like children (as observed in the person's interaction with children), and that he/she is respected in the community.
- There is a question about whether it is best to work with parents in their homes (on a one-on-one basis) or in groups where they can share experiences with other parents.
- It is unclear what amount of training is required initially, and over time, to have adequately trained personnel.
- Home visiting once every two weeks does not appear to be enough, yet it is costly to implement a weekly home-visiting programme.

In general, the findings and questions found in an evaluation of the home visiting programme in Jamaica apply to home visiting programmes in many parts of the world.

As with the other ECCD programming strategies, there are benefits and cautions related to home visiting programmes. The benefits include the fact that in working with adults and family members, both caregivers and children can benefit from the programme. Another major benefit is the fact that improvements in development are more likely to be sustained because activities that promote the child's development are part of the child's everyday life and not just provided for only a few hours a day. A third benefit is that broad coverage can be achieved at relatively low costs. In addition, when using a home visiting strate-

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gy, it is not necessary to set up separate programmes for working with adults and siblings; all family members can be included in home visits.

There are also some cautions that need to be considered. To be effective, the information provided to caregivers must be timely in relation to the child's developmental stage. In addition, the information should be culturally appropriate and built on current beliefs and practices, while adding to caregivers' knowledge. In terms of the transmission of the information, the teaching/learning process should be participatory, allowing for interpersonal exchange and mutual support.

Home visitors need to be extraordinarily sensitive so as not to undermine the position of a parent or other authority figure in the home. In a programme in Colombia, a conscious choice was made not to include a home-visiting component. It was felt that that such visits would undermine a mother's position and confidence within her own home. Instead, mothers (or principal caregivers) meet once a week in a community centre where they are provided with information about health, nutrition, and psychosocial development. The bringing of parents together for periodic meetings is yet another very effective way to work with them.

■ Parent groups

Parent groups can be developed to stand on their own, or they may be offered in conjunction with other services. Those parent groups that are created as stand-alone efforts generally bring parents together for a series of sessions. There might be eight to ten modules offered over the course of a year, for example. Most of the time, those organizing the course determine the topics. In some instances, the topics to be discussed are defined by the parents themselves. Within many parent groups information is provided that it is felt would be useful to parents, such as health, nutrition, and child development information. Modules may consist of some theoretical as well as practical applications of the topic. To help reinforce what is being learned, modules frequently include activities that parents can use with their children between sessions.

As noted in the discussion on content above, some parent groups discuss much more than parenting. Discussion topics can include more general family issues, and the discussion may extend to the community and the environment—even political issues may become the topic of conversation.

It is not always possible to bring parents together in groups. Lack of time, long distances to travel, and lack of familiarity and/or comfort with group discussions all make it difficult to bring parents together. Thus, other vehicles have to be sought for reaching parents. In this regard, media is a largely underutilised resource.

■ Media/Distance education

Media, particularly radio, can be a powerful tool in working with illiterate cultures. Radio also helps to reinforce written materials for those who are literate. Thus this category of parent programmes includes projects geared toward the broader community that makes use of all forms of media. Examples include programmes that publish magazines, books, articles, pamphlets and/or that produce television and radio programmes directed toward parents or to those who work with parents. There are a number of such efforts. They include the following:

The *Programma de Padres y Hijos* (PPH) was begun in 1979 by the Centro de Investigaciones y Desarrollo de la Educacion (CIDE), a private research and development centre in Chile. The target population is poor communities, with the ultimate goal being to support the personal growth of the adults and the overall development of the community. CIDE began by working with fifty groups of twenty families in Osorno in southern Chile. Now there are approximately 200 groups in the Osorno area. And an additional eighteen groups have been established in Santiago.

In order to reach these communities most effectively, the programme combines distance education with a system of local groups facilitated by trained promoters. The weekly meetings are timed to coincide with a radio broadcast that uses radio dramas and other devices to pose a problem and to stimulate conversation. The discussions, which are led by a local "promoter" chosen by the community, lead to suggestions and plans for community action in the various areas, and parents then talk about activities they can do during the week.

Discussions at the meetings originally centred only on different aspects of the upbringing of children, since these are primary concerns for many parents. Topics included how to help children learn to talk, to read, and to count; human relations in the family; nutrition and how to make the best use of food supplies; food preservation; and alcohol abuse. These topics have broadened to include questions related to more general family issues (for example, earning a livelihood). Materials related to each theme supplement the radio presentation of the problem. A toy library was also created, making toys available to families. Parents can take them home for the week, or use them as models and make their own.

The Ministry of Intelligence in Venezuela also took advantage of media in the *Proyecto Familia* project described above. The project was developed in 1980 in Venezuela, where the television was a major vehicle for delivering several aspects of the programmes in urban areas. This was a viable approach since in urban Venezuela television is said to reach ninety-six percent of the population. (In most rural areas, radio reaches more than eighty percent.) To take advantage of the television coverage and the existing communications infrastructure, *Proyecto Familia* produced an impressive number of television and radio programmes and spots, as well as slide presentations and films. However, an evaluation of the effort suggested that programme goals were not met through the television only strategy. This was not too surprising.

Koh (1989), in a review of mass media as a strategy for delivering a message, concludes that parental education approached exclusively through mass media campaigns is unlikely to have much effect. Changes in attitudes and practices tend to require interpersonal communication to reinforce messages provided through the media. Mass media projects work best when broadcast programmes are heard/viewed by a group and then discussed together. The interpersonal communication fosters both understanding and action. Thus media needs to be used in combination with the kinds of group discussions present in the Chile PPH programme described above and the Filipino model described below.

The finding that there are benefits from combining media with discussions is not surprising. There are benefits from creating a set of activities that reinforce one another. Thus, in some places, parent programmes have been developed that provide multiple ways of reaching parents and other family members who are involved in caregiving.

■ The use of multiple strategies

Some programmes have been quite successful at combining a variety of strategies. The Parent Effectiveness Services (PES) in the Philippines, mentioned earlier in this article, is one example. The PES programme uses group sessions as the primary means for reaching parents. The groups are known as Neighbourhood Parent Effectiveness Assemblies (NPEA). These consist of a group of ten to twenty parents who get together weekly to discuss common problems and their solutions in order to improve their home and neighbourhood environment. A trained ECCD worker (from the local government unit) identifies couples of reproductive age and/or couples and caregivers with children aged birth-six who need to gain knowledge and skills on parenting. These couples are invited to become part of an NPEA. Lead couples for each group session are identified ahead of time and take charge of reminding other participating parents about the scheduled session and for preparing the venue for the meeting. They also arrange for volunteers to take care of the children while parents have their group session.

Another component of the PES programme involves home visiting, which provides individualized parent effectiveness training when parents are unable to attend the weekly group meetings or participate in the parent groups associated with day care services. In addition, home visits are conducted for all families at several stages of implementation of the PES: at the initial stage to establish rapport with the family; after the organisational meeting; between group sessions to follow up on plans and to reinforce concepts discussed; and to deepen rapport with the family. The field worker or volunteer from the community conducts the home visits. Field workers and volunteers are required to complete a form to document the results of the home visits after the sessions. The forms are used to record parent feedback on family activities.

Still another support for the programme is the use of media. In 1992 *ECCD on-the-air* was created for national broadcast. Radio programmes are produced for parents covering the topics within the PES curriculum. The programme consists of drama, songs, and a talk show. When the programmes are broadcast, parents who are enrolled in the programme are provided with lesson sheets and assignments to use at home. PES workers/volunteers each monitor the participation of twenty parents/caregivers. A certificate of attendance is given to parents who complete the thirteen sessions that comprise one module. A second radio programme was created in 1994—The *Filipino Family on the Air*. This is a more informal programme with a thirty-minute magazine format. Thirteen episodes have been created, with a second set of thirteen being developed, using the Convention on the Rights of the Child as the framework. (Angeles-Bautista 1998)

Considering the popularity and wide reach of radio—eighty percent of Filipino households, including far-flung rural areas, have access to radio—this is a cost-effective way of disseminating information. Combined with the NPEA and home visits, the use of a broadcast medium is a promising direction for the expansion of PES.

Another example of a programme that uses multiple strategies is the Save the Children (USA) programme in Bangladesh that supports an integrated child development programme in five districts in Nasirnagar. In the programme, different elements—a parenting/caregiving programme, community-based child development centres, child-to-child, and child clubs—are closely interwoven and mutually reinforcing. The project is based on the concept that there is much to be gained by combining the best of both modern child-centred and traditional approaches, as well as by developing alternative ways of supporting parents and caregivers within a given context. (Arnold 1998a)

■ Programmes for mothers and children

One set of programmes that it is natural to combine is those involving opportunities for children to come together during the time parents are involved in education, support, and/or training groups. Thus in some places, programmes have been developed which are offered at the same time for mothers and for children.

FAMI in Colombia is a programme where mothers

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Parents need to be supported in their efforts while their children are young.

and children come together twice a week for activities, including health and nutrition check-ups and play. FAMI evolved from the national home-based programme (Hogares Comunitarios de Bienestar) sponsored by Instituto Colombiano de Bienestar Familiar (ICBF).

In 1968, through ICBF, the Colombian Government established childcare centres for needy children. However, these reached only three percent of those who could benefit from the centres. It was clearly too costly to create childcare centres for all those in need. So, an alternative was developed. This was the home-based childcare programme (Hogares Comunitarios de Bienestar), where local women are trained and given support to provide care to children from their neighbourhood. This programme took hold, and in 1997 it reached 48.5% of the neediest children two-seven years of age. However, this did not meet the needs of children under the age of two. As a result FAMI, was developed for families with children under the age of two, and consists of play groups and parent discussion. By 1998, FAMI groups included more than 6,000 families. (Arango 1998)

In Peru, Mothers' Clubs have been organized to address a number of women's issues. To make it possible for women to attend meetings, playgroups for children have been organized to take place at the same time. The playgroups include traditional games and play activities to address the enhancement of children's self-esteem and to stimulate parental involvement with the project.

■ Working with parents within existing services

There are likely to be activities that both parents and other caregivers are already engaged in within a community where child development information can be added to the content. The argument is made that since the mother is already making the effort to obtain a service, it would be less costly to add other messages on to that service than to create a stand-alone effort. There are a variety of programmes that already attract parents where child development messages could be added. These include health services, literacy programmes, and women's groups, among other settings. Some examples of what might be done to include a broader range of child development and parenting messages follow.

Health services. If there is a community-based health service that is reaching parents, this would be an ideal setting within which to add other messages (such as those about child development and family life) and strategies (follow-up, parent groups). Generally health centres have a set of activities they conduct with mothers, and messages which are passed on to the mother during a health check-up or an immunization visit, or through contacts made when the child is brought to and from a childcare centre. In many instances, there is little control over when the mother/caregiver gets the message and there is little or no follow-up. To strengthen the overall package, child development and family life issues could be added to the curriculum, and supports could be created so that the messages get reinforced over time through parent groups and/or home visits for those who could benefit most from them.

One programme with great potential for very broad coverage is the *Posyandu* programme in Indonesia, briefly described earlier. Currently, as the programme was developed, the focus is on child survival. Families attend the *Posyandu* once a month, and for the most part, families do not pay a fee for the services. Since government offers the *Posyandu* it has the potential to reach a large number of hard to reach families. As of 1997, the *Posyandu* programme served almost 340,000 villages in Indonesia. (Satoto 1997) Thus there is a structure in place that could be used to do much more than it is doing.

While its primary function is to serve the health needs of young children and mothers, other social activities are sometimes offered through the *Posyandu*. As stated by one of the providers, "When only weighing is offered, the services are boring." (Satoto 1997) The *Posyandu* Programme could be expanded by adding new content. Additional messages could be added to the information that the Kader currently offers to mothers—messages related to developmental milestones, stages the mother should be looking for in her child's development, and ways that she can offer appropriate support to the child.

Posyandu could also be expanded in terms of the ways it works with mothers. For example, groups could be established. For the most part, mothers make the effort to come to the health service and avail themselves of the services provided. Since some of the women spend considerable time traveling to the health clinic, sometimes they are reluctant to rush back home. Thus mothers already gather informally when they bring the children to the health clinic. These informal groups could be given form. It many settings it would be reasonable to assume that mothers would be willing to stay on for a half-hour or hour-long group session.

The *Posyandu* programme is a good example of a well-developed delivery system that is only doing part of the job it could do. With relatively little financial input greater value could be provided.

Another health setting that could be maximized is hospitals. One of the strategies of the Mental Feeding programme developed in the Philippines in the 1970s was to reach out to parents in a variety of settings, one of which was in hospitals. Through the Mental Feeding programme, parents of malnourished children in the hospitals were taught about health and nutrition. They learned to provide their children with stimulating play activities to assist the treatment and recovery process while the children were in the hospitals.

Literacy Programmes. Adult literacy programmes can become partners in getting messages to parents in that the content for literacy programmes can be used as a vehicle in the dissemination of child development and family-related information.

An example comes from Nepal. Begun as a pilot project in October 1991, the Health Education and Adult Literacy (HEAL) project is funded by USAID and implemented by two U.S.-based NGOs—John Snow Inc. and World Education. The ultimate aim of the project is to promote health education, and, hopefully, to encourage action to improve the health of women and their families. The strategy being used is to increase the literacy skills and health knowledge of female Community Health Volunteers and mothers in one district of Nepal. Over the course of the two-year pilot, seventy-seven literacy classes were started in areas surrounding three health posts. (Shrestha, Myers, and Smith 1996).

The literacy course itself has three phases. The first phase is a six-month basic literacy course. The materials consist of drawings, which depict native village situations. The content of the lessons relates directly to the situation in which learners live, and provides opportunities for reflecting on basic information presented about such topics as health, conservation, family planning, agriculture, and social problems. The instructional strategy is participatory and hands-on, helping learners to learn from one another.

The second phase is a three-month, post-literacy course based entirely on health topics, including AIDS, nutrition, first aid, family planning, and sanitation. The post-literacy classes meet three times a week for two hours.

The third phase is a twelve-month continuing education phase during which the Community Health Volunteer (CHV) and the Mothers' Group members meet once a month to read new health-related literacy materials and to discuss the topics presented. The CHV runs these monthly meetings using the materials as a starting point for discussion.

Within the HEAL project there has been an attempt to consciously combine literacy with messages to enhance women's and family health, which ultimately will be beneficial for children's development. Thus, literacy programmes are an important way to provide support for parenting. However, women come together in groups for a variety of purposes, not just to become literate. Women also come together to learn new skills, to create income-generating projects, and for the purposes of undertaking collective projects involving loan schemes. Through these groups there is the potential to reach women with a wide variety of messages. Some examples of the intersection of women's groups and support for children's development follow.

Women's groups. In many parts of the majority world, women in development (WID) efforts have found ways to bring women together in order to provide them with education and training that will enhance their opportunities to become more active economically, and also for their personal growth. WID efforts generally address the needs of women as women, and not just as mothers. Nonetheless, most of the women who participate in these programmes are mothers. Thus, if they are going to be freed to address their issues as women, they need supports in terms of their parenting. As a result of this reality, parent support programmes have been created in conjunction with, have been added to, or have been the impetus for many of these women's groups. Cited below are a few of the ways that women's groups have been combined with support for women in their parenting role.

Project Entry Point in Nepal is unusual in its joint attention to the child care needs of working women (families) and the developmental needs of young children. The setting for the project is rural Nepal where more than forty-two percent of the population is estimated to live below the poverty line and where the infant mortality rate is above the national average of 119 per 1000. Women play a major economic role in the maintenance of the family farm, which produces approximately eighty percent of the family's average annual income. They are also engaged in a range of informal income generating activities. (Arnold 1992)

Recognizing the women's economic role and their need for credit, the government initiated a programme of Production Credit for Rural Women (PCRW). The goal of the credit scheme is to support activities that would simultaneously generate income and improve conditions in the community, including levels of health, nutrition, and literacy.

As the project took shape, it became clear that working women (because society continued to assign them responsibility for the upbringing of children) needed an alternative arrangement for childcare. Project Entry Point was born to free women's time so that they could engage in economic activities and improve the well being of their children. To obtain and guarantee repayment of credit, the credit programme asked that the women organize themselves into small groups of five or six. These groups of women also became the unit for organizing day care. Within the group, women agree to share responsibility for taking care of their children between the ages of one-three in their homes on a rotating basis, with each woman taking the children in her home for one day of each week.

All women in the group receive an intensive four-day training course at the village level, offered by trainers trained by Seto Gurans, a Nepalese NGO. Each group is provided with a basic kit of materials. Since the majority of the women are illiterate, pictures of different activities are used in the curriculum. A pressing demand for training—beyond the capacity to meet the demand—suggests the project is successful because others also want to start similar programmes. In 1989, approximately fifty-four groups of mothers in eleven districts were in operation, and an estimated 1,700 children were participating in this home day care arrangement. (Arnold 1992)

A variety of factors seem to contribute to the success of Project Entry Point, including the power of group support, a decentralized planning process involving community definition of needs, a comprehensive curriculum, and on-site training which respects traditional practices while incorporating new information. Success has occurred in spite of difficulties related to Nepal's difficult geography, the need to follow up initial training, and occasional conflicts between traditional and child-centred approaches to childrearing. Because local women, on a rotating basis, provide the care, the operating cost to the government of this project is very low. (Arnold 1992)

Another programme connected to credit for women is a revolving loan scheme in support of income generation in Peru. The *Tapunacuy* project has as its primary focus enhancing the health and developmental status of young Quechua children (birth-seven) living in rural areas in the Department of Apurimac. The vehicle being used is the already-established Mother's Clubs present in the region. In addition to starting play groups for the 600 children in the area, the project staff also plans to manage a revolving fund and provide technical support for the setting up of forty community gardens, complemented by sixteen training courses on child nutrition (with special emphasis on goiter prevention). Members of the Mothers' Clubs receive training on management and content issues of child-related projects, and are stimulated to set up local health committees. The mothers will also be responsible for monitoring the children's current status (health, nutrition, interfamily communication), covering the 741 families in the region.

In Nasirnagar (Save the Children/USA's impact area in Bangladesh), those who participate in parenting sessions are members of a women's savings group. The savings groups meet weekly, and twice a month they have sessions on childrearing practices. The facilitators of these sessions are Save the Children's staff from that area. Save the Children's partner organisations are also implementing the parenting programme with their adult literacy groups.

A rather unique combination of women's and children's programmes is the Rural Toddlers programme in Brazil. In addition to the programme for toddlers, there is a mother's healing group and experimental income-generating activities (cultivation and processing of fruit, artisan crafts). The project was established in 1996 as part of a larger community development effort, with funding from the Bernard van Leer Foundation. The project is designed to address the needs of poor mothers and their children in the rural area of Paripuiera, in the municipality of Beberibe, State of Ceara.

Before the project began, there was a survey of all families with children aged birth to three and of the whole community, through participatory observations and home visits. There is a also a radio programme every two weeks that discusses the project's progress so that other rural areas can learn about the programme, including information on income-generating activities.

Parent (Women's) Empowerment. Sometimes early childhood programmes begin by addressing the needs of women as mothers, and then expand into other topics. For example, *Al Tufala* in Nazareth began as an early childhood programme, but it now also focuses on the empowerment of women. Training focuses on women's personal development (self-esteem, self-image), the development of a sense of their heritage (identifying with and preserving their heritage while living within a Zionist state), and their development as women (in terms of leadership, management and networking). Each discussion (training session) begins with a focus on the women themselves and then lessons are drawn from their personal experiences. For example, to help women see that they already know a lot, the women are asked at what age they begin to play peek-a-boo with a child. Women know when it would be too early for a child to try to play this game, and at what age a child could engage with someone in the game. The group then discusses what it means developmentally when a child is able to play peek-a-boo. In another example, in teaching women to support their children's drawing, they have the women draw pictures themselves, so they can base their work with their children on their own experiences. This process of beginning with the women's own experiences, and then extrapolating on these to address what women want to foster in their children, and what that means in terms of what the women can provide, is consistent in all the project's work with women. (Espanioly 1998)

Community Development. The programmes described above all address the specific needs of parents. The programmes with the most direct impact on children are those that provide information and supports to parents in their parenting role. An example of a direct effect project is one designed to teach parents how to use oral rehydration solutions. Successfully training mothers in oral rehydration therapy can decrease the number of children suffering from dehydration within a short time. Then there are parent programmes that have a more indirect effect on children. Examples of these include adult literacy programmes. Improving maternal literacy rates will improve the quality of life for families and children, but the positive effect on children's quality of life may not be detected for nearly a generation. There is a third kind of programme where the impact on children is even more indirect. These are community development programmes.

One of the tenets of ECCD programmes is that they need to be holistic and address the needs of the child within the context of the family and community, as the well being of the child is greatly affected by the environments within which he/she lives. Thus another valid approach in working with parents is through community development efforts. These programmes address various needs within a community on the assumption that what benefits the members of a community will ultimately be supportive of children's overall development.

An example of a community development approach is the Mount Pinatubo programme being supported by the Community of Learners Foundation (COLF) in the Philippines. In 1991, Mount Pinatubo, an unpresuming mountain in the range stretching north to south along the west coast of the main island in the Philippines, erupted and destroyed the land and villages on its slopes, reaching as far as thirty kilometers from the mountain.

There were signs that the mountain was going to erupt months before it exploded and sent molten lava flowing in all directions. As a result, the Aeta people who lived on the slopes of the mountain had been evacuated before the mountain actually erupted. They were moved to resettlement areas on land owned by government that was given to the Aeta. There are two principle settlements that are the focus of the COLF project—eight and eleven kilometers from the place where the people lived before relocation.

At the outset, the programme was designed to provide a support system for the Aeta children and their parents through an integrated community-based programme with a special focus on the early childhood years. COLF's approach to supporting children and families involved working directly with children and with parents, who are the primary caregivers and teachers of their children. Thus, the project focused on the provision of basic services—health, nutrition and education—for both the children and the parents.

During the first phase, playgroups were created for children, with parents invited to be part of the process. Women from the community were trained to serve as parent volunteers to work with children alongside COLF staff during the programme, and to assist in helping to organize parent activities that take place at the same time as the playgroups. In fact, the playgroups and parent meetings take place in contiguous space. Mothers bring their infants with them to the parent group meetings, and as soon as children become mobile they move from their mother's lap and become involved in playgroup activities. Thus the programme serves the full pre-school age group, from birth onwards.

During Phase II, it became evident that something needed to be done for the school-aged children, those who were currently in school and those children who, for whatever reason, were not attending school. Thus, a child-to-child, after-school tutoring and support programme was created to involve children aged seven to fifteen. In addition, during Phase II, the community development efforts were also expanded. This was done by including a broad range of topics in the parent education programme, initiating small-scale projects (sanitation, cooperation in running the children's programmes, agri-based and off-farm livelihood projects), and eventually organizing cooperatives among the participating families.

Community development can take programme developers in many different directions, and, as a result, the ways in which parenting needs are met vary greatly. This makes it very difficult to calculate the costs of such programmes.

What are the Costs of Different Strategies?

The issue of costs of ECCD programmes is complex, and so it will not be addressed fully in this article. Nonetheless, some people have tried to calculate costs of parenting programmes, as stand alone efforts and as efforts linked to other services. What follows is a very brief description of calculating costs for parenting programmes.

Few of the programmes reviewed were able to provide data on costs. In general, however, adding components to already existing programmes is clearly a low-cost alternative. These programmes already have facilities and personnel providing a service. The costs of adding a new component primarily involve the creation of appropriate messages, and then the training and supervision of existing personnel.

Parent groups are also relatively inexpensive. For example, for the *Padres y Hijos* (PPH) project in Chile, the cost per child per month of the programme was calculated at US $6.38. Since that figure alone does not have much meaning without some points of reference, the costs of PPH was compared with economic indicators and the costs of other services offered in the region. For example, a minimum wage was five times the monthly cost of the parent programme. In terms of other services, a high quality kindergarten in the region was six times the cost of the parent group, and the cost of a low-quality day-care centre was double the amount. If calculation is made on a per-person basis (i.e., to include family members as well as the child), the cost amounts to US $1.62 per person per month. These costs do not include time donated by the community. In brief, community participation brings both benefits and lowered costs. (Consultative Group on Early Childhood Care and Development 1996)

In some ways, the most expensive parenting programmes are those that provide intensive one-on-one interventions, as in home visiting. As noted in the discussion of home visiting, if these programmes are going to have maximum impact, services need to be delivered once a week. Thus, home visitors cannot work realistically with more than fifteen families, and most often the number of families is much less, depending on the distances to be traveled between homes. If the home visitors are professionals, this makes the cost of service delivery very high. Even when home visitors are volunteers, however, the costs are relatively high, since those delivering the service need appropriate supervision (one supervisor for ten-twelve home visitors, twenty at the most). There is also a high training cost since there is a high turnover rate among volunteers; thus there is a need to constantly be providing training to a new cadre of workers. An argument made in defense of the costs of home visits is that in home visiting programmes it is possible to identify those families most in need so that the services are much better targeted than is possible in more general parent groups.

Needless to say, the calculation and comparability of costs is an area of ECCD programming where there is little understanding or consensus. There is no uniformity in the definition of what costs should be included, nor how costs should be spread over potential beneficiaries.

Another area that requires greater understanding is the impact of parent programmes. In the following section what we know from evaluations of parent programmes is presented.

What Do we Know from Evaluation Results?

There are several levels at which evaluations can occur: with children, with parents, and with those who provide the programmes.

Outcomes for children. In some programmes, possibilities have existed for looking at the impact on children. But, in general, for parent programmes, since there is no controlled input in terms of what is actually delivered to children, the impact on children is difficult to measure. Nonetheless, in the PPH programme in Chile, an evaluation of the programme has shown positive effects on the children, on their parents, and on the community at large. (Richards 1985) Children (programme and non-programme) were rated by teachers in terms of their readiness for school. Children whose parents were in the programme were rated higher. On the WISP (a Chilean version of the Weschler scale), over a four-month period of time, the PPH children improved 6.2 points compared to an increase of 3.4 points by the non-PPH children. (Myers and Hertenberg 1987, 84)

Outcomes for parents. Within parenting programmes, changes for parents are, understandably, the most easily assessed. Within the PPH evaluation, changes in the adults were evidenced by different attitudes and actions in terms of the way they talked about the project, reached agreements, and acted on decisions. "The basic change identified was from apathy to participation in constructive activities as a sense of self-worth was strengthened." (Myers and Hertenberg 1987, 84)

Some variation on the change in parents from apathy to participation noted by Myers and Hertenberg is the most frequent outcome for parents. In a discussion of observations made during a visit to a parent training session in Bangladesh, Arnold (1998b) writes: "Walking into a session one could find a variety of activities going on. For example, an intense discussion of the participants' own childhood experiences from which the facilitator helps draw out a list of basic needs of children—a list which bears strong similarities to that in any psychology textbook, but is constructed from their own experiences. Or one could find them roaring with laughter as they invent multiple games to play with a heap of leaves or a pile of seeds."

In addition to moving from apathy to participation, one of the significant outcomes of parent programmes is that parents realize what an impact they have on their child's development. In an evaluation of the Child Development Unit in Bangladesh, at the end of a session one participant stated: "I never knew I was doing so much to help my daughter grow up strong and clever. Now I know I can really help her have chances I never had." However, this kind of comment is often tempered with a wish that the woman had access to this kind of information earlier.... "I wish I'd known more about the way children are when they are very small....I could have done so much more." (Akhtar 1998)

Once parents realize how important their role is in supporting their child's development, several evaluations reveal that there is a change in the parent's behaviour, particularly in terms of their interactions with their children. Within the home-visiting programme in Sri Lanka, for example, one of the outcomes was an increase in the verbal interaction between parents and children. Traditionally within Sri Lanka there is little communication between adults and children. As in other cultures, before the programme it was not understood that children benefited from communication with adults. The activities in the Sri Lankan curriculum encourage and require adults to talk to children. This has been very positive in terms of children's language development and the strengthening of the bond between parents and their children. (Evans 1996)

The evaluation of the Child Development Unit in Bangladesh yielded the same results in terms of increased parent-child interaction. Because of the comprehensiveness of the evaluation, a variety of other areas of impact were also identified. The evaluation included interviews of participants and staff (the facilitator, programme supervisor, and programme developer), data gathered on participants' feelings, and observations made during sessions to determine the quality of participation. The results provided very positive feedback about the programme. This included:

- Parents felt honoured and important when they realized that cultural practices are really valuable in supporting children's development.
- Parents/caregivers enjoyed themselves during the time they attended the sessions.
- Women are empowered because their role as mother is being valued.
- Women were able to talk to other women for the first time and share experiences (e.g., about family violence).
- Mothers felt the need to involve fathers in the sessions.

Arnold (1998b) sums up the parents' reactions when she notes: "The telling time comes as one observes [parents] with their young children, listening to the way they now talk more with their children, see the value of their questions, and the usefulness of their children's play."

Changes in parental knowledge have been demonstrated in some programmes. Within the Non-formal Maternal and Child Health Project in Cambodia, the follow-up evaluation showed changes in the villagers' knowledge, attitudes, and practices of health education. Responses to questions indicated that project participants were more likely to adopt better health practices or to know about better health practices. (Holcombe, Murakami, and Samnang 1996)

In another programme, the evaluation suggests that those who participated did not gain as much knowledge and understanding as would be desirable. This was the case within an evaluation of the *Proyecto Familial* in Venezuela, where television was used to provide parents with child development messages to help stimulate a parent's interaction with the child in order to promote cognitive development. This project was created with strong political backing and produced some excellent materials, but an evaluation in 1984 concluded that, overall, the effort constituted "a promise yet to be fulfilled." (UNICEF 1985) The attainment of project goals was limited by the fact that the mass media were not linked to a system of inter-personal contacts. In urban areas, television viewers were able to identify the name of the project but there was no evidence that the approach had changed practices. After an initial run, it became difficult to convince commercial television stations that the messages should continue to be shown. In rural areas, however, there seemed to be somewhat better success. Radio messages were better accepted by local stations in search of programme material and were broadcast more often. The messages were also partially linked to a system of interpersonal communication involving both rural extension workers and health personnel in primary health care centres. (Koh 1989) Thus it was concluded that the use of media (radio and television) was much more effective when discussion groups could be organized in conjunction with such programmes.

Outcomes for those who deliver the service. Another level at which parent programmes have seen an impact is for those who work with parents. In the evaluation of the Child Development Unit in

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Child development messages could be added to existing health, literacy, and women's programmes.

Bangladesh, facilitators and other staff (those who received the training) came to understand the importance of learning about traditional childrearing practices. Staff also realized that it was important for them to develop parenting skills if they were going to work with parents on these skills. Furthermore, the facilitators appreciated the use of a variety of participatory methods that made the sessions attractive and joyful, and also that elicited ideas from the participants. The facilitators felt that these techniques strengthened and enhanced parents' existing knowledge and skills about child-rearing practices. (Akhtar 1998)

As noted earlier, one of the outcomes of the evaluation of the home visiting programme in Jamaica (Brown and Williams 1998) was that those who work with the families felt they benefited considerably from being involved in the programme. They gained respect within the community and their employment options have been expanded.

In summary, some attempts have been made to evaluate the outcomes of parenting programmes. Nonetheless, these evaluations are spotty, and to date not enough evaluations have been conducted for us to have a clear sense of the range of possible outcomes from these programmes. There is much to be done in this arena. There are also other aspects of parenting programmes that need to be explored further. These are addressed in the final section of this article.

What Do We Need to Know More About to Reach Children Birth-Three through Parenting Programmes?

As has been noted, the creation and implementation of programmes for families with the youngest children (from birth to three years of age) is not well developed. Despite the programme examples cited above, we do not, as a field, have a lot of experience in the development and evaluation of such programmes. There is much to be learned. Some of the questions that need to be answered in order to create quality parent programmes are as follows:

■ How do we identify those who could benefit most from parenting programmes?

In designing programmes to reach children and families it is important to start with a specific and informed understanding of the political, economic, social, and cultural forces at work in a given setting. This may seem self-evident, and yet too often programme developers/funders start with assumptions about the population in need; they select a programme model that has worked successfully in some other place, and they set about trying to adapt it to local needs. But this approach has proven less than satisfactory in many regards—often the match between the model and the community is less than ideal; the process of programme selection has excluded the community and makes community ownership more difficult to achieve; and the assumptions about the community may turn out to be inaccurate and misleading. Therefore, it is important to do a local needs assessment, with careful identification not only of the children most at risk but also of the type of factors contributing to the risks that exist in that setting. The risk factors in families, as well as among children, need to be identified. These include such things as social status, self-esteem, poverty level, and educational levels.

It is also important to involve the community, families, and caregivers in assessing their own needs (and strengths), and in defining their own understanding of the problems that need to be addressed and the systems that need to be strengthened. In addition to assessing needs, it is useful to examine the demand for services for the under-threes, and the nature of that demand. If some people perceive a need, yet there is little demand, then one strategy would be to look for ways to raise awareness of the needs of the under-threes by disseminating enough information about child development that people begin to demand the best for their children.

One difficulty inherent in assessing (and intervening on behalf of) a community at risk is that often the factors that put the children at risk are linked to political agendas. In situations where ethnic minorities are socially marginalized, or where poverty is linked to caste or other cultural hierarchies, or where one cultural group is living in a community dominated by another cultural group, or where there is armed conflict, the supports provided by a culturally-relevant programme may be perceived as a threat to the dominant group. It is sometimes possible to present interventions on behalf of children as neutral ground, and to use such interventions as an entry point to begin addressing political and cultural rifts.

■ How do we reach children who are hard to reach, and support them appropriately?

An integrated approach to early childhood development may seem best in theory. However, it often proves difficult to bring together health, nutrition, education, and other services to provide the multifaceted attention desired, particularly in contexts where children are hard to reach. Nonetheless, as with other ECD strategies, parent programmes work best when offered with complementary programmes. Thus, a key principle in reaching children who are hard to reach is to build upon existing social systems—if caregivers are part of a religious group, if children are seen periodically by traveling health personnel, if village leaders can act as conduits or animators, if older siblings participate in schools or non-formal programmes, then all these resource people can be activated to reach out to the children and parents who need better supports through a variety of programming efforts. Thus, whenever parent programmes can be integrated into adult education efforts, working cooperatives, government provision of services, health centre offerings, and primary education activities, they are likely to reach a greater number of people than when they are offered as freestanding parent programmes.

In some settings, media, such as radio and radiophones, can provide conduits for information, but in all settings, children who are hard to reach and the people who care for them need personal contact in order to be able to use parenting information or materials most effectively.

■ What is special about the needs and characteristics of children birth to three that should be incorporated into a parent programme?

Many of the inputs that children need most at this age—love and nurturing; consistent adult responsiveness; good nutrition; appropriate stimulation and interactions with objects, sensations, and people; safety; relatively prompt responses to help them manage hunger, fatigue, feeling overwhelmed, boredom, and discomfort; and language stimulation and interaction—are crucial to the lifelong functioning of a healthy human being, but they are difficult to build into a programme. Nonetheless, these components need to be included in parent programmes.

In addition, as has been noted, most of the brain's key pathways are established during these years, but the interactions and experiences necessary to that activity are individualistic, and cannot be pre-programmed in some kind of behaviourist prescription. Thus the focus on programmes for children birth to three is not on *what they must learn* (as it often is within primary education programmes and even within some school readiness programmes), but rather on *how they need to be cared for*. Quality holistic parenting care is the best investment at this age, and the best hedge against later learning disabilities and developmental delays or blockages.

Programmes for infants and parents of infants should be inclusive of all children, including those with special needs. Since each child has basic needs—these are the starting point for all parenting. And those parents whose children need special resources, in terms of health services or nutritional strengthening, or whose children need help with disabilities or neurological disorders, can be best supported if the child and family are not marginalized—that is, if they receive the supports they need as part of a larger effort to help all children receive quality parenting and attention.

■ How do we create culturally relevant and culturally appropriate programming?

The first principle in creating parenting programme content is: Do no harm. In other words, it is important to make sure that the programming we design is supportive of children's existing culture, support systems, available care, and individual needs. This may sound like a cliché (or a broken record), but in many programmes, parents are still asked to assimilate materials that are imported from other cultures, and to take on practices that may in fact cause them more confusion and self-doubt than an improvement in their abilities as parents. As Salole states, "We have systematically allowed people to feel incompetent and inadequate in raising their own children." (10)

In line with this, it is crucial to be cautious about—and when possible avoid—transferring pre-packaged models of parenting support or education. Adapting a model to a particular setting requires great care so that the imported curriculum/programme does not cut out or obscure valid local ways of structuring care. The process of adapting a model is much like creating a model. It requires the same steps of needs and context assessment, team building, participatory training and joint planning, development of programme ownership by all stakeholders, development of locally valid content, and implementation of the programme in specific ways that support and strengthen existing practices. While it is sometimes helpful to use programme experience gleaned in another setting, and to adapt materials developed with similar populations of children or parents in mind, it is important to recognize the limits of these source materials, and leave room for local creativity, as well as local ways of structuring parental supports.

■ How do we incorporate both traditional and scientifically validated childrearing practices, language of the family and surrounding community, and parental patterns of integration with the community into our services, supports, and training?

One of the most challenging principles to act upon is to truly recognize the value of existing practices and values, and to build on strengths and existing knowledge in more than token ways. The dilemma project designers face is how to support existing knowledge, while also wishing to introduce new practices and beliefs that have been shown to be effective in terms of child development. The challenge is to find the right balance between the traditional and the modern. The chart developed by Arnold (1998a, 4) presents some of the dimensions that need to be balanced in creating parent programmes.

WITHIN THE TRADITIONAL	IN RELATION TO NEW INFORMATION
to recognize, respect, and build on existing strengths	to acknowledge and respond to the need for access to new information
to build confidence	to build understanding of fundamental principles for effective support of children's development
to offer opportunities to share experiences and generate solutions	to address the fact that sometimes these fundamental principles are in conflict with dominant ideas (either because of certain cultural practices or where communities are under extreme pressure)

If a programme starts with local understandings of what children need, and can build upon traditional practices that are helpful (e.g., infant massage in India, postpartum rest of mother and child in many Muslim countries, and responsiveness to the child's desires in Bali), and introduces new knowledge about health and nutrition and development in the context of dialogues, sharing, and brainstorming, these new practices are more likely to make some sense and take hold than if people are simply given information.

One way to build on what exists is to look for local parents who have found ways to modify traditional practices and then incorporate more developmentally appropriate ones as well. Another way to accomplish this is to use "experts" who belong to the same cultural tradition or heritage as the parents the programme is seeking to work with. A third way is to present "scientifically validated information" (a phrase we use advisedly since today's scientific truths are often viewed as naive by future generations) as one of several valid choices, and explore with parents the implications of applying it in their lives. If families are included in creating programme materials, then the language used to describe child development can reflect the community's own experiences and dialects more fully. However, the inclusion of parents in creating programmes has to be genuine.

All too often we ask people to define their needs and then we tell them they can only need what we can provide.

Arnold sums it up by saying, "The key [is] a respect for different views, and a commitment to developing processes that allow different voices to be heard—with an openness to creating new knowledge and new ideas with all involved learning along the way." (1998a, 3) It is helpful to remember that even when introducing scientifically validated information, in the end there is individual choice for parents and communities about how they will raise their children (except in cases where practices violate a child's human rights).

■ What do we know about how adults learn?

Adults learn much as children learn—through active experience, through trial and error, through exploration, discussion, participation, and interest. Thus, training trainers and supporting families should be an interactive process, not a didactic one. Most adults do not respond to being lectured, drilled, or put through rigid exercises. And if we want to train parents to be flexible, responsive, loving, and interactive with their children, then the programme methods should reflect these values and behaviour styles. People need training experiences that are human, personal, and personally meaningful. There are many fine materials available that demonstrate ways of preparing or training skillful, responsive implementers, who in turn can help parents become more effective and skillful care providers and community members. It is important that the training, and the actual activities undertaken with parents, reflect the knowledge that is out there about active participation, active learning, and interactive training methods.

■ How do we create programmes that more effectively integrate parents and children into the social fabric?

Most parenting programmes aim to change the parent. They focus on training the parents to interact more effectively with their children, to understand child development, and to provide more appropriate care for the child. This is all valuable support to families. However, in many settings, changing practices and beliefs within families is not enough. Systems are set up in ways that exclude or marginalize certain children. Health services are inaccessible or unaffordable; education and employment opportunities are closed to certain families or ethnic groups; social services keep families in cycles of dependency rather than gradually empowering them. In such settings, parent programmes should also be designed to help change the systems. Therefore, it is important to take a systemic view and create programming that strengthens all the systems that must eventually support and sustain families. This means, again, being aware of how the social fabric works, and identifying where there are disruptions to that fabric.

It is also useful to pay attention to the policy frameworks (and political rhetoric) that exist—or are needed—in the settings where we are working. Current policy needs to be examined to see the ways in which the rights of the under-threes (and their parents) are addressed. Governments may be ambivalent about their responsibility to children and families (e.g., health systems may look at birth-two, but ignore three-year-olds). It is also important to know what supports or impediments exist within the legal and regulatory context.

In conclusion, contemporary families in all parts of the world require support. Over the past twenty years, the world has been changing rapidly, and there is a need for families to adjust to these changes, both within themselves and in terms of the kinds of support they provide for their children, who are entering an even more rapidly changing world. In situations where children are at risk (as a result of biology and/or environment), there is even a greater need to provide supports to the families who care for those children.

In many settings, migration patterns (e.g., rural to urban, the crossing of national borders) have left families fragmented, and with traditional childrearing practices that no longer serve children and families in the new environment. Families frequently need help breaking isolation. They need support in identifying where and how they belong within the larger community context. They need support to participate in cultural activities and to bring their children into contact with resources. They might also need support in developing literacy, economic, and social skills that can sustain them as participating members of a culture and community.

In designing programmes for families it is important to begin with the assumption that those caring for children have the best interests of the child in mind. All those who take on a parenting role seek to do the best they can in relation to providing for their children. Sometimes there are economic limits on what families can provide; at other times caregivers lack time and energy. Nonetheless, in working with families, it is important to know that there are things parents are doing that are positive, regardless of how impoverished the situation might be. Any family support programme should acknowledge and build on what parents and other caregivers are able to provide. If there are practices that were once functional in the culture, but which now appear to be detrimental to the child, then new information can be presented, but it needs to be done respectfully.

As Arnold notes, "In most places there is a good deal of interweaving of traditional with modern, indigenous with imported, adaptive with dysfunctional. Listening to the different voices and taking account of the different perspectives in developing ECD programmes is an important part of working towards children being raised and educated in ways that enable them to function effectively as responsible citizens in a rapidly changing world as well as retaining a clear cultural identity and sense of values." (1998a, 8) Thus, supporting families to become part of the social fabric includes helping them to sift through their cultural values, validating what they wish to maintain, connecting them with like-minded others, and adapting their parenting behaviours in ways that respect their traditions, but also that support the healthy and safe development of their children within an ever-changing context.

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Related Resources

Publications

Rethinking the Brain—New Insights into Early Development. *Rima Shore. 92 pps. Available from the Families and Work Institute, 330 Seventh Avenue, 14th Floor, New York, NY 10001. Phone: (212) 465-2044, Fax: (212) 465-8637.*

Recent research reveals that the experiences a child has during the first three years of life have a decisive impact on how his or her brain is "wired". With every game of peekaboo, thousands of connections among brain cells are formed or strengthened, adding a bit more definition and complexity to the intricate circuitry that will remain largely in place for the rest of the child's life. These are not connections that can be easily made beyond the early years. When it comes to developing social, emotional, and intellectual skills, timing is crucial.

In 1996, the Families and Work Institute convened a national conference on brain development. One hundred fifty of the nation's leading brain scientists, child development and early education experts, business leaders, and policymakers gathered to discuss their research and its implications for parents, educators, legislators, and employers. This book explores, in lay terms, the key findings of recent brain research, and what those findings might mean for us all. The design of the book is excellent, and the information is presented in a visually appealing fashion, with many supporting photos, quotes, and inserts.

Pub. # D97-01 priced at $25.00 per copy.

Families Speak: Early Childhood Care and Education in 11 Countries. *Patricia Olmsted, David P. Weikart, eds. 1994. Ypsilanti, Michigan: High/Scope Educational Research Foundation.*

This book reports the first phase (of three phases) of the Preprimary Project (PP) conducted in eleven to fifteen countries. Sponsored by the International Association for the Evaluation of Educational Achievement (IEA), the study examines early childcare environments and assesses how these environments contribute to children's current and subsequent development. Preschool education is particularly interesting to explore because much of it is provided at home by the child's primary caregivers. In the first phase of the PP, parents were surveyed to determine the type of early childhood care and education services used by families and also to determine some of the characteristics of the families and the services they use. The study also provides a picture of the daily life patterns of four-year-olds. One finding implicates parent education by revealing that children are with primary caregivers from between fifty-three percent (Belgium) to seventy-four percent(Germany) of the (waking) day. As a result, the book states that it is important "to educate parents and to raise their expectations concerning services for children, to encourage them to demand better services and in general to create public awareness of the importance of early childhood care and education." (356) Lilian Katz responded to the findings by reminding readers that everyone acknowledges the importance of quality instruction by teachers, particularly at ages five and six, but no one addresses the preparation of children and their parents before those ages.

Publications on Phase II and Phase III are soon to be released. Phase II takes a subsample of those covered in Phase I and conducts extensive observations and interviews to examine the interactive and structural characteristics of the major early childhood settings. It also explores the impact of programmatic and familial factors on children's developmental status at age four. In Phase III, a follow-up study is planned of the children in Phase II when they are seven years old. This longitudinal aspect will assess the progress of the children.

Parenting Curriculum

The Avance Family Support and Education program began in the 1970s in San Antonio, Texas. It seeks to help children succeed in school by teaching parents how to teach their children and by meeting parents' educational and job training needs. About 2,500 families participated in Avance programs during 1994. The AVANCE parent-child education curriculum is a comprehensive parenting program for low income parents and their children.

Goals:

- To familiarize the parent with the basic social, emotional, physical, and cognitive needs of young children as well as to offer practical ways in which these needs can be met through the family.
- To provide assistance, information, and support to parents for the purpose of alleviating problems and obstacles that may impede improvement of effective parenting skills.
- To increase parental knowledge, attitudes, and skills in the growth and development of children zero-three years of age, so that the parent can provide proper guidance, nurture, and discipline.
- To prevent problems in children, such as learning delays, child abuse and neglect, academic failure, mental illness, and, eventually, poverty among children.

The following modules are available, in both Spanish and English.

Unit 1: Overview of Parenting
Unit 2: Physical Needs of the Young Child
Unit 3: Nutrition and the Young Child
Unit 4: Childhood Illnesses
Unit 5: Children's Behavior
Unit 6: Cognitive Needs
Unit 7: Emotional Needs
Unit 8: Social Needs
Unit 9: Self-awareness/Goal setting

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Mapping the Contours of Effective Programming:
The Effectiveness Initiative 1999–2002

In January 1999, the Bernard van Leer Foundation and partner organisations in the Consultative Group on Early Childhood Care and Development initiated a three-year investigation known as the Effectiveness Initiative (EI). Our overall goals within this effort are to discover what makes an effective programme work, and to initiate an international dialogue on effectiveness that will deepen our understanding of how to create and/or support effective programming for young children and families.

The EI effort is grounded in the in-depth study of ten specific programmes (see Table 1 for a list of the 10 programmes). The EI is also designed to be a cross-site, cross-agency collaboration and exchange that stimulates ongoing dialogue about effective programming. Furthermore, it is designed to test the application of qualitative research methods, well tested in other development arenas, to the field of international ECD. The goals of this effort are two-fold: to gain deeper insights into what makes ECD programmes effective, and to activate international dialogue on effectiveness that takes us, as ECD professionals, beyond our present scant measures and indicators of programme success.

To achieve these goals, the EI set the following objectives:

- to identify ten diverse Early Childhood Development (ECD) programmes that people consider effective (and that have operated for at least ten years) and to explore them in depth;
- to engage people within the ten project sites, together with staff from international NGOs, to work in cross-site, cross-cultural teams to carry out such explorations;
- to learn how to apply qualitative research techniques in the examination of ECD programmes;
- to create tools that allow us to understand the complexity of these programme experiences more fully;
- to stimulate cross-site and inter-agency dialogue about what makes ECD programmes effective, how, and for whom;
- to understand more fully the interplay between a programme's processes, activities, and outcomes; and
- to map the contours of effectiveness, defining what makes a programme effective, under what conditions and for whom it is effective; what supports and what hinders a project under particular conditions and in particular contexts; and what these contours tell us about effective programming more generally.

The programmes included in the EI represent a diversity of settings and approaches to early childhood programming.

Table 1—**Programmes included in the Effectiveness Initiative**

COUNTRY	PROGRAMME NAME
Kenya	**Madrasa Resource Centre**
Mozambique	**Assoçiação da Criança Familia e Desenvolvimento (CFD)**
India	**Self Employed Women's Association (SEWA)**
Israel	**ALMAYA—Association for the Advancement of the Ethiopian Family and Child**
Philippines	**Mt. Pinatubo Project**
Columbia	**PROMESA—Proyecto de Mejoramiento Educativo, de Salud y del Ambiente**
Peru	**PRONOEI—Programmea No-formal de Educacion Inicial**
The Netherlands	**Samenspel**
Portugal	**Agueda Movement—Bela Vista**
Honduras	**Madres Guias—Guide Mothers**

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Working with each programme is a team of at least four people—some insiders and some outsiders—who are selecting and creating tools appropriate to help them develop an understanding of the programme. The teams are supported by a cross-agency Advisory Committee of ECD (Early Childhood Development) programmers, policymakers, and practitioners from around the world. The teams and members of the Advisory Committee met together as a whole group in June/July 1999 to identify a set of basic questions and concerns they wish to examine across all ten sites. They will continue to meet periodically to share their tools, methods, experiences, questions, concerns, and evolving maps of understanding. The methods used by each team will be created or selected from the entire 'toolkit' of options offered by the rich experience of the talented individuals who are taking part in this effort.

One of the primary objectives of the Effectiveness Initiative is to create a set of methods and data that is much broader than but as persuasive as current economic analyses of the benefits of early childhood programmes. There are now data available that demonstrate the economic benefits of investment in the early years. But while the early childhood field as a whole has benefited greatly from the research that has generated these data, this should not limit the search for effective ECD programmes. Unwittingly, programming planners and policymakers often allow the economic data to limit their imagination when considering programming possibilities. The economic analyses have focused us on a search for economic outcomes; this narrows understanding of the full impact of effective early childhood programmes on individual children, families, and communities. Furthermore, the current research findings have focussed attention on centre-based preschool programmes, since this is the early childhood strategy often used as the basis of analysis. Planners have become so susceptible to this way of thinking that the potential benefits of alternatives such as home-based, parent support, and community development programmes have not been explored in any depth. This project is an attempt to move beyond this narrow focus, and the qualitative research tools being used in the EI offer us methodologies to complement what has already been researched using quantitative techniques.

We believe that bringing the use of qualitative tools into the world of ECD for gathering and processing data will give a better understanding of what we see and hear and distil from the EI process: this will be first time for many. We know that in quantitative research it is considered crucial to begin with a fixed/prescribed set of methods and procedures that are to be used with conformity across all study sites. However, in this effort, we are consciously working without a normative blueprint in the hopes that we will be able to identify patterns and individual differences among the case studies that would not appear if we started with a fixed constellation of assumptions. By taking this approach, we get both information and process.

Effectiveness Initiative: Progress Report

The Effectiveness Initiative (EI) is now well underway. The energy, enthusiasm, and commitment coming from the people engaged in the EI process, directly and indirectly, is stimulating a wide range of activities. These activities are being generated with two overall goals in mind: to discover and define what makes an ECD programme effective; and to initiate an international dialogue on effective programming for young children and their families.

During the first year of the EI, the primary task has been to put together a plan of action for each of the ten sites involved in the EI, and to begin to create a set of tools that are being used across the sites to explore programme experiences in their full complexity. This paper provides a description of the qualitative tools that are being developed within the EI, as we think this is a good way to convey the dynamics taking place within the project, as well as to present the progress we have made since January.

Tools for Gathering and Analysing Data

The initial questions

As the EI got underway, the Advisory Committee met and outlined some of the questions that they thought would be important to ask across all sites. As we began talking with the sites, we used these questions as a way to help stimulate discussion. The questions prompted people to think about their own history with the project, to reflect on how things had changed and how they had been influenced over time. Soon the questions took on a life of their own, and subsequently they became the first instrument developed within the EI.

The initial questions consist of a set of overlapping "maps" that can be used to describe a project, and which tells the story of the project over time. The timeline begins with the programme's origin/genesis. As we move along the timeline, there are questions related to what different people see as key events/change points/crucial moments that brought about changes within the project.

In relation to each of the identified key events, a series of dimensions is then explored. These include:

- A map of influences that contains a description of the context (the economic, cultural, and political realities) at different times over the life of the project.
- A map of attitudes/stances/beliefs/values that tries to pinpoint the vision of what the project is trying to achieve, the philosophical underpinnings and beliefs on which the project is based, the underlying assumptions about people and how they operate, and the goals and objectives that have guided the project.
- A chart to map the structure of the organisation, along with a description of the way that structure has changed over time, as well as information on the changing leadership within the project.
- A mapping of the culture of the organisation as demonstrated by the processes used within the organisation to address problems, make decisions, and overcome obstacles.
- A mapping of linkages used to illustrate the ways in which the programme works with those outside the organisation: individuals, governments (national and local), NGOs, donors, etc.
- An outcomes mapping which looks at ways the project has affected each of the stakeholders/ beneficiaries/participants—children, families, communities, participants—in the operation of the project, the implementing organisation, other organisations, government policies, and programmes.
- Finally, projects are asked to envisage the future, and to describe how they see the project developing over time with respect to the underlying philosophy; the assumptions, goals, and activities; the nature of the organisation; the processes used to make decisions; the kind of linkages with other organisations; and the nature of the outcomes.

While this is the common framework, the maps may well change, or some may be dropped and others added as people begin to use them more extensively.

Over time, other tools have been developed to help unpack the content of projects in their complexity and diversity. These tools are enabling us to look at projects in different ways.

The river analogy

One of the first reports on the EI ended with a summary in which an analogy was used to help portray what we anticipated might be the evolution of a project. We chose to compare the life of the project to the life of a river. We hypothesized about how a river might develop from a small spring or stream that has a course or direction, but which is influenced by many things as it flows from its small beginnings into a lake or the ocean. Rivers ebb and flow as a result of the context within which they live; drought and floods and other forces influence them; they also have an impact on the things they encounter in the environment along the way.

This one paragraph analogy at the end of a report was picked up by one of the Team Leaders. He decided he would have people in the Colombia project tell their story by having them draw a picture of a river depicting the project. Since then, other Team Leaders have taken up the idea. It has been used in different ways at the different projects. And one of the EI team members, who is also working for another organisation, conducted the exercise with a non-EI project in El Salvador. This has expanded the EI network as well as has provided another field test of the exercise.

Several variations in how the river analogy is used have been created so far. For example, individual people in the project draw their own river expressing their point of view, and then the individual stories are compared. Or those involved in a project are divided into small groups and collectively each small group creates its own river, which again is shared with the larger group. In some instances, consensus is sought and one river is created. In other instances, the individual rivers are maintained to illustrate the divergence of opinion; consensus on the project's story is not sought.

In all instances, the act of creating the river stimulated lively discussion about key events and about what the major influences and outcomes of the project have been. It has helped those working with the projects to gain a much deeper level of understanding about the dynamics within a project, and it has stimulated discussions that would not have arisen if more standardized instruments (interviews, questionnaires) had been applied.

In essence, a summary paragraph sparked one person's creativity, and a new instrument was created. It has become a way for people at the different EI sites to visualise their projects, and it provides a way of getting project staff to talk about their experiences in a different way. The river takes on a different shape at each new site. Every trial gives rise to new ideas, both for the people who do the exercise and for the facilitator of the exercise.

The river chart provides another common tool that is being used by all the projects, thus providing another platform for comparison, and yet it is a tool, which also accounts for diversity of contexts.

The Initial Questions and the River Chart are both tools which permit the mapping of the projects' stories. But projects' stories are only one part of the effort to find out what makes a programme effective. Exploring elements of effectiveness in ECD programming ultimately means understanding the individual experiences of children, families, and communities at risk. Understanding people's experiences allows us to gain greater clarity of our role in providing appropriate supports. Thus, in tandem, another tool has been developed: one that maps people's stories or locates important moments in people's experiences in relation to early childhood development.

Story Telling

Story telling is a qualitative research technique designed to get at people's individual experience of events. This technique is being used because it helps us to open up to different sources, different kinds of data, and different ways of processing data. Through the telling of stories, we are hoping to gain a better understanding of what it means when people say that something has worked for them during their experience in early childhood development. In relation to the EI specifically, we are asking people to tell us stories about a time when they felt that what was occurring in an early childhood setting was effective.

We first tested this activity with partners in the Consultative Group on ECCD, and with BvLF staff. The assignment in both instances was the same: Think of a moment in an ECD setting when you said to yourself: "This is really working." The definition of 'ECD setting' could include personal or professional moments involving children, parents, ECD planning, or anything else the individual considers to be connected with ECD. Participants were then asked to describe that moment in writing, in as much detail as possible. (The analysis of the data—written stories and discussions—is presented in detail in *Early Childhood Matters* '93, October 1999, a publication of the Bernard van Leer Foundation.)

Once the stories are told, some are shared with the group, and then they are 'coded' by the group. It is the group itself that generates the meaning from the stories, first by noting all the words that have meaning, and only later bringing together some of those words and identifying themes. So far we have seen that the methodology allows us to:

- Focus in on what it means when something is working in an ECD setting (i.e., getting at people's understanding of what it means to be effective in the realm of ECD programming);
- Generate a data set that does not require long, agonizing essay writing on the part of the informants;
- Give informants the tools to analyze their own stories;

- Use stories as a way to identify common and shared themes; and
- Use these themes as a basis for a more informed dialogue with and among the people who are living the experience.

This activity is being tested in the field with the PRONOEI programme in Peru. First, a group of teacher coordinators wrote their stories and identified what was effective in the programme. The next day, one of the participants repeated the activity with a group of Aymara animators and went with them through the analysis and interpretation of their stories. The results helped them get a better understanding of shared concepts, attitudes, and practices, and also made them aware of differing views about what is relevant for the success of the programme.

We expect the outcomes to further consolidate the use of this type of qualitative research technique and to provide a way to make sense of qualitative data.

Plans for the Future

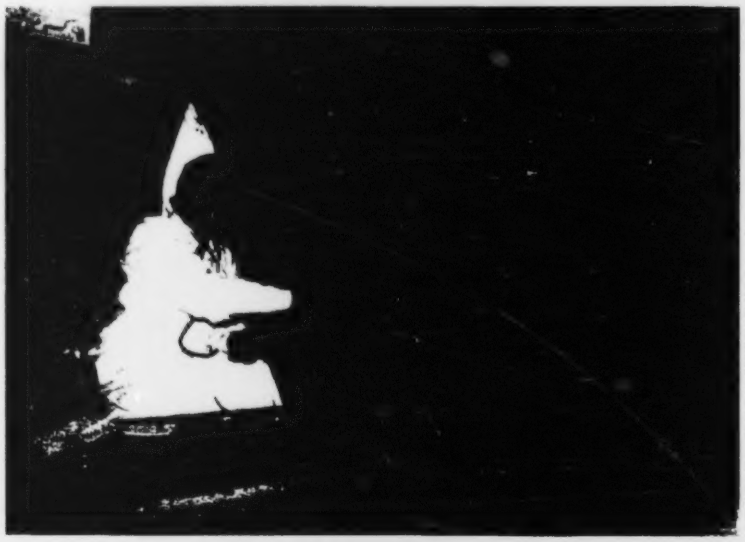
Each of the tools described above has a specific function in relation to data gathering, data analysis, and drawing together the lessons learnt. Together they are the beginning of an integrated set of activities that will help us to examine what we mean by effective ECD programming. In this sense, the tools should not be seen as discrete activities; they are interwoven, forming the toolkit for the EI. The process of creating the tools and instruments is also part of the strategy to help the EI participants gradually feel more comfortable with qualitative research.

At this stage we are still developing and testing our tools. What is becoming evident is people's openness to collecting different kinds of data from a variety of sources, and to creating techniques for processing data that stimulates the development of new tools and creative ways to use and adapt them to different contexts.

The process of creating tools has generated a new level of energy, enthusiasm, and creativity as the flexibility and openness of the EI gives people the time and the space to ask the questions they have been asking themselves and to use the instruments they have started to develop.

While we are developing tools to gather qualitative data, we are also in the process of finding the tools for qualitative analysis. As noted, this process is already underway, particularly in relation to the story-telling methodology. The individual sites are beginning to process the findings from the different instruments they have been using, but they have expressed a need to work together on this task to maximise what can be learned. Therefore, in May 2000 we are planning to hold a technical workshop where people will be able to present both the data they have gathered and the ways that have been developed to make sense of those data. The participants in the workshop can then discuss and elaborate on what has been developed to date. It is entirely possible that this will generate additional tools and processes of analysis!

For more information on the EI initiative or to be added to the mailing list to receive the newsletter, contact Angela Ernst, angela.ernst@bvleerf.nl and Babeth Lefur, babeth.lefur@bvleerf.nl.



Aga Khan Foundation/5-1001-076/Jean-Luc Ray

In Search of Early Childhood Care and Development Indicators: A Contribution to the EFA Year 2000 Assessment

This project is coordinated by the Consultative Group in partnership with five of the regional networks and funded by UNICEF, New York and UNICEF, Latin America and the Caribbean, as well as the Bernard van Leer Foundation. The impetus for the project originates with the World Conference on Education for All.

In March of 1990, the World Conference on Education for All approved a Declaration that included the following statement: "Learning begins at birth. This calls for early childhood care and initial education. These can be provided through arrangements involving families, communities, or institutional programmes, as appropriate." (Article 5)

The Framework for Action also set as one of the targets to be considered in plans for the 1990s: "Expansion of early childhood care and development activities, including family and community interventions, especially for poor, disadvantaged and disabled children." (Paragraph 8)

These statements about initial education and early childhood care and development (ECCD) provide the specific starting point for this project as the Guidelines for the EFA Year 2000 Assessment include only two indicators for ECCD, as compared with thirteen for Primary Education. The two indicators selected are both enrolment indicators that do not allow assessment of the quality of the inputs to early childhood programmes, the efficiency of the programmes, the programme effects on children, nor the financial contributions made by nations to this part of the educational spectrum. If early childhood is to be taken seriously, there is a need for a complementary effort that would provide additional and useful information on a systematic basis about the advance of this part of the EFA initiative.

The purpose of this project is to extend and refine the definition of indicators and measures for assessing early childhood education and development within the context of The Year 2000 assessment of Education For All (EFA). The results are intended to contribute to (or complement) information presented in country reports and to enrich discussions at the regional policy review seminars, thereby also assisting the writing of the global document.

More specifically, the project proposes to:

- formulate and provide technical guidelines for indicators, complementing those provided in the Technical Guidelines prepared for the Year 2000 Assessment;
- experiment with collecting information in five countries (Philippines, Namibia, Nepal, Colombia, Bolivia, and Jamaica), applying the extended guidelines and drawing on additional sources that may be relevant;
- prepare country reports that would:
    - *a. provide the information requested, in so far as possible;*
    - *b. critique the process;*
    - *c. suggest additional options for monitoring related to existing information systems in the countries; and*
    - *d. suggest changes in existing information systems that are needed in order to improve monitoring.*
- prepare a summary report bringing together results from the various country studies, including the information collected and suggestions for indicators and processes of collection to be applied in the future.

Please refer to the "Calendar" for dates of EFA meetings.

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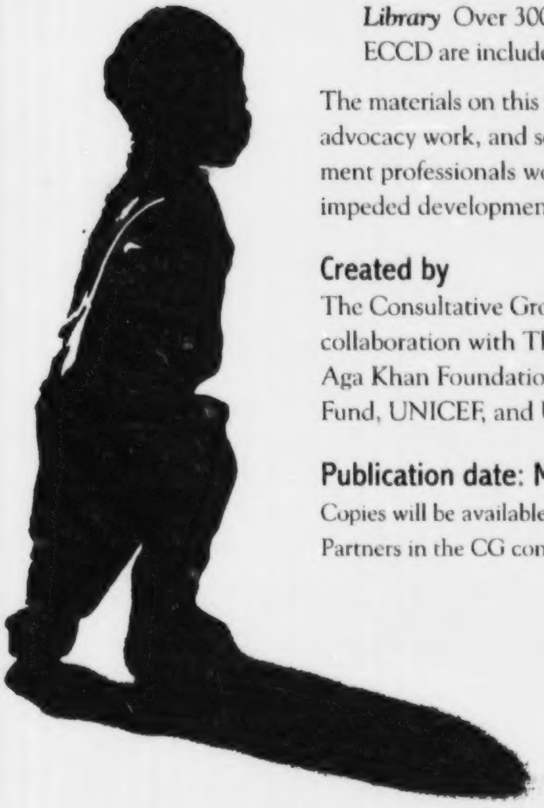
EARLY CHILDHOOD COUNTS

Programming Resources for Early Childhood Care and Development

CD-ROM

Aimed at development professionals, program planners, trainers, policymakers, and child advocates, this resource kit of materials on Early Childhood Care and Development offers tools for developing a wide range of programs to strengthen supports for young children, their families, and communities.



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Programming Guide An easy-to-use 391-page guide* that details the preparation, planning, implementation, financing, monitoring, and evaluation of diverse ECCD programming strategies.

Media Materials Two media sections (Why Early Childhood? and What is ECCD?) include videos, slide shows, and fact sheets aimed at raising awareness about the need for attention to ECCD.

Library Over 300 background texts, program examples, and print resources on ECCD are included in full. A searchable database helps you find what you need.

The materials on this CD-ROM can be used to support program planning, training, advocacy work, and self-study, and can also serve as a resource library for development professionals working wherever children are living in poverty and at risk of impeded development.

Created by

The Consultative Group on Early Childhood Care and Development, published in collaboration with The World Bank Institute and produced in partnership with Aga Khan Foundation, Bernard van Leer Foundation, Christian Children's Fund, UNICEF, and UNESCO.

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Copies will be available from the Consultative Group on ECCD Secretariat and all the Partners in the CG consortium. For orders, contact:

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*A Spanish translation of this programming guide will be available from UNESCO in summer 2000.

Network Notes

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Activities of the CG Secretariat

During 1999 there were several shifts in staffing within the Secretariat of the Consultative Group. Judith L. Evans left the position of Coordinator of the Secretariat to join the staff of the Bernard van Leer Foundation to serve as Coordinator of the Effectiveness Initiative (see page 37 for a description of the CG-affiliated activity). Ellen Ilfeld left the position as Director of Communications. Two new people joined the Secretariat as Co-Directors: Kathy Bartlett who is currently working part-time for the Consultative Group from her base as Programme Officer for ECCD at the Aga Khan Foundation (Geneva), and Louise Zimanyi, who is working half-time for the Consultative Group, based at Ryerson University in Toronto, Canada. Robert Myers continues to be an active member of the Consultative Group Secretariat from his home in Mexico City.

There have also been shifts in the administrative home for the Consultative Group. The Consultative Group has moved from the Education Development Center in Washington, D.C. to Ryerson Polytechnic University in Toronto. The Consultative Group can be reached through the following address:

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Launch of the Consultative Group in Canada

The Consultative Group and Ryerson Polytechnic University's School of Early Childhood Education, in collaboration with UNICEF, Canada and UNICEF, New York (a major supporter of the Consultative Group) were pleased to commemorate the launching of the partnership between the Consultative Group and the School of ECE with a ribbon-cutting ceremony at Ryerson University on October 29, 1999. The CG was able to coordinate efforts with Ryerson University to have Roger Moore, UNICEF's Goodwill Ambassador, present at the launch, as he also received an honorary doctorate of law from Ryerson on the same day. In his role as Goodwill Ambassador, Roger Moore has traveled widely to the world's trouble spots to assess the situation of children and to raise much needed awareness and public support for the

Activities of the CG Secretariat

needs and rights of children. Most recently, Mr. Moore advocated for the needs and rights of children in Mexico and participated in major UNICEF fundraising events in the United States, Canada, and Europe.

Those present at the ceremony included: Louise Zimanyi, Co-Director, Consultative Group: *"I look forward to the development of the partnership and wish to thank Kathy Bartlett and Judith Evans for their work in bringing the Consultative Group to Ryerson"*; Dr. Claude Lajeunesse, President of Ryerson Polytechnic University: *"We are pleased that Ryerson is the Consultative Group's first university partner. The Group is a perfect example of the kind of international partnership that Ryerson seeks to establish as a key part of the university experience. Globalization needs to be reflected in all areas of our campus—in curriculum, in research, in teaching, in community service, and in the presence of international students and faculty"*; Donald Mckay, Coordinator of International Projects for the School of ECE and Ryerson liaison to the Consultative Group: *"The philosophy and mission of the Consultative Group are closely aligned to the efforts of the School to internationalize curriculum, research, and project work. Our belief is that everyone working with young children should have a deep understanding of the issues facing young children and families throughout the world"*; Waheed Hassan, Senior Advisor for Early Childhood Education, UNICEF, New York: *"There has never been a more important time to join forces in support of child development. The CG continues to be one of the most important forums at the international level for sharing information and expertise on early childhood care and development"*; and Roger Moore, UNICEF's Goodwill Ambassador: *"We need to give priority to the needs of children in our society. We need to listen to what children are telling us and support them. If we love our children, they will in return love us and love one another"*.

Children from the Ryerson Early Learning Centre made their Halloween rounds and took great delight in having Roger Moore put coins in their UNICEF boxes! In addition, UNICEF staff, Ryerson staff, faculty, students from various departments, and partners involved in international projects were present for the ceremony.

Ribbon-cutting ceremony. From left, Donald McKay, Louise Zimanyi, Roger Moore

Below: Collecting for UNICEF. From left, Shan, Marta Bot, Simon, Adam, Claude Lajeunesse, Anissa, Barbara Lozano, Celestine, Gabrielle, Roger Moore

Dave Upham/Ryerson University/October 1999

News from the International Secretariat

South Asia Network: Caroline Arnold

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The South Asia Network is an informal network of agencies involved in Early Childhood Development working actively across some South Asian countries. It is a loose-knit group of individuals and organisations who value the chance to share experiences, materials, and approaches, and who are working to develop an active and shared understanding of their work within a larger framework.

The group has developed in a very organic way as a result of the commitment to ECD networking efforts of two Save the Children Alliance members (US and Norway). The establishment of a regional child development adviser was the catalyst for the initial development of this particular network because it was important to have someone in a regional role to establish many of the connections. The original group included Alliance members and local partners (ECD NGOs/training centres etc.), but it is now expanding in response to other interested agencies such as UNICEF offices (close co-operation with UNICEF has been very important) and local organisations that do not necessarily have any formal partnership with any of the other members.

Key activities of the network have included:

- the development and exchange of papers on particular topics, the sharing of materials and methodologies, and exchanges/training with partners in the region;
- the exchange of information on conferences/meetings, and representation at regional workshops/meetings (Parenting/Caregiving, Child Participation);
- the design and start-up of a Childrearing Study[1] that has been conceptualized as a regional initiative and which is starting up with selected communities within Nepal;
- the identification of parenting/caregiving programmes as a priority (although by no means exclusive) theme for '98–'99;
- the improvement of the way we articulate the critical connections between ECD programmes and child rights, and increasing the frequency with which we present our perspective (for example at the National ECD linkages seminar conducted with policymakers in Nepal in December '98, the annual Alliance directors meeting in November, the World Forum on Early Care and Education, April '99).

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[1] The childrearing study is a joint initiative of the Save the Children Alliance/UNICEF/The Consultative Group/Seto Gurans National Child Development Services/City University of New York/Center for Education and Research in Development.

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Plans

To develop stronger linkages with India networks. This is beginning to be remedied through connections with the UNICEF, India office, but the need is to connect effectively with some of the key ECD organisations in the region and their wealth of experience.

To increase the use of information technologies. We have, however, just received an offer of support in establishing and managing a website, and we need to explore as a group how we want to take this forward.

Country Exchanges

Exchanges (in the form of visits and training opportunities in a host country) took place during eight of the last twelve months. Some of the exchanges which took place were: the Bangladesh Child Development Unit assisted with a low-cost materials development workshop for NGOs in Nepal; the leading national ECD NGO in Nepal provided home-based programme training for Bangladesh NGOs, Alliance members, local partners, and UNICEF visited Sri Lanka to study their successful mechanisms for ensuring financial sustainability of community-based ECD centres; UNICEF, Alliance members, and local partners' took a study tour to Baroda (University and projects); and Child-to-Child inputs from Nepal to Bangladesh. General advocacy materials, such as Nepal's posters and Bangladesh's desk calendars, have been widely shared in the region and adapted by the individual network members to their own national needs.

In addition, the Consultative Group's South Asia Secretariat member has provided ongoing, on-the-ground, capacity-building support to ECD programme development in different Asian countries. Examples include assistance with establishing linkages between NGOs (local and international) and the national Basic and Primary education project in Nepal, which, for the first time, includes a major commitment to ECD; support of the Bangladesh Child Development Unit's continuing development of new partnerships (e.g., with BRAC and Grameen) and its development toward a fully autonomous training and resource institute; and support of the development of a renowned Save the Children initiated nutrition programme into a broad-based ECD programme.

Parenting/caregiving programmes for ensuring young children's rights

Regional workshop/network meeting/study tour, Bangladesh, Nov '98. Representatives from eight different agencies (mostly non-governmental but with some government representation) in eight countries came together for this meeting. In addition to the observation of a parenting programme in a remote rural area, the group shared programme experience and materials (full sets of materials from four countries with well-developed programmes were provided), and the group undertook a highly experiential approach to exploring child rights and appropriate programme design. Network members developed a set of guiding principles for use and promotion regionally with all parenting/caregiving programmes, as well as plans for the further development of and advocacy for programmes in their individual countries and in continued inter-country linkages.

Much attention has been given to clarifying the ECD/CRC (Convention on the Rights of the Child) connections. The network has concluded that there has been too much attention given to rationalizing support for ECD programmes by using specific articles within the Convention. In fact, ECD programmes are essentially an integrated set

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of actions for ensuring young children's rights and, like the CRC, uniquely concerned with the whole child. ECD programmes had previously been "pigeon-holed" in many of the network members' organisations as being only part of education. While ECD is indeed a key element of basic education, it is equally critical to overall child rights strategies, and as such their potential has not always been fully appreciated. Several of the network members in Nepal and Bangladesh have recently been re-conceptualizing their programmes to focus on developing strategies at different levels (family, community, local institutions, national policy) to create supportive environments for children's overall development.

Childrearing study

The plans for the childrearing study were developed following very positive reactions to a paper presented at an International ECD seminar held at the Aga Khan University in March '98 and recently reproduced in UNICEF's "Education Update". The paper addresses the issue of parent education programmes around the world which tend to disregard parents' and caregivers' values, knowledge, and achievements, and which use a "deficit" model. It argues for new approaches which allow different voices to be heard—approaches which value diversity and which are open to creating new knowledge and new ideas.

The childrearing study is a direct outcome of network members' struggles to identify appropriate ways to address these issues in practical terms. The study will attempt to build our understanding of different childrearing beliefs, values, patterns, and practices, all of which are of key importance if our programmes are to be genuinely contextual. However, perhaps its main significance is in the emphasis on the development of effective ways to facilitate dialogue and debate with families and communities around key issues for children. The emphasis on collaborative dialogue is seen as the basis for practical joint planning for action which will help promote children's overall development and ensure their rights. The Nepal research team has just completed the initial training and research design phase—adjusting methods in a pilot community. The main participatory action research will be conducted between May and August, the findings will be written up before the end of the year, and a widely useable "toolkit" will be developed at the beginning of 2000.

ECD experts meeting on assessment

Held at UNICEF, Manila, Sept. '98 Two South Asia network members participated in this meeting which reviewed existing tools and acted as a jumping-off point for further work which will attempt to better enable us to measure programme effectiveness and impact, based on contextually appropriate child development indicators.

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At the Regional Representatives meeting in Washington in September 1997, I reported on the 1997 Regional Plan of Action for ECECD, adopted in July 1997 by the CARICOM Heads of State (17) as part of CARICOM's Human Resource Development Strategy. The activities reported below follow that period.

Opportunities to work with and link to regional colleagues have principally taken place around three major activities and in anticipation of a fourth:

1. CCDC's Technical Assistance Contract with UNICEF to support national plans of action following the Regional POA.

Beginning in September 1998, UNICEF provided funds for an average of three days a week for Sian Williams, CCDC Consultant, to begin country-by-country consultations to support Caribbean progress in developing certain aspects of the regional plan of action. To date four UNICEF priority countries have been working on a range of developments with Sian's assistance. This support has proven catalytic in all four countries, albeit at varying paces; highlights to date include the following:

Dominica

- A new national council on preschool education has been assisted in formulating a preschool chapter of Education Sector Plan 1999–2006.
- An evaluation of preschool service quality has been conducted, adapting Clifford and Harms' Early Childhood Environment Rating Scale, revised for a twenty-five percent sample of all preschools. Data collected, analysis, and report due September.
- The establishment of a basic database on all preschools, which is currently being integrated into the local Education Management Information System.

Grenada

- The development of a draft policy on early childhood programmes was agreed to, via local consultation on four papers: a) aims and curriculum vision; b) access issues: views of parents and their needs/wants; c) standards for providers and practitioners; and d) administration and management (of the entire system of day care and preschool services).

Three of these papers have been drafted; the fourth will follow local discussions about the integration of provisions. Local workshops on these papers have been held in order to develop policy formulation.

St. Lucia

- Revision and integration of regulatory provisions for day care and preschool provisions in anticipation of the new Education Act 1999 (adaptation of Organisation of Eastern Caribbean States model education act), accomplished through a series of participatory workshops in districts of the country.
- National Symposium on Early Childhood Services, April 1999 (2 days, 200 participants), which provided very useful debate on the importance of early years for child development and which gave special attention to transition issues to primary school. Full symposium report locally prepared.
- Curriculum review to begin in late 1999.

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St. Vincent

- An initial visit identified the following as local priorities for drafting standards for early childhood services as part of the new (OECS) draft Education Act: reviewing a new classroom curriculum, developing an accreditation system for early childhood workers, and planning for a national consultation.
- A local preschool training NGO (VINSAVE) obtained European Union funds for a consultant to undertake some of these tasks on an intense basis before year-end. CCDC will either undertake the consultancy or work cooperatively with another consultant.

Technical assistance work is scheduled to begin with Suriname and Trinidad before the end of 1999.

2. *UWI's Child Focus Project "closure" activity to share its outputs at a regional workshop held in May 1999 in Jamaica*

The Child Focus joint project of the University of the West Indies' CCDC and the Institute of Education concluded its period of funding from the World Bank (if not all of its activity elements) in April 1999. In May, the Project hosted a three-day workshop in Jamaica for two representatives from each of the nineteen Caribbean countries. Governments were asked to designate the two key persons with responsibilities (either within government or the NGO sector) for advancing services for children birth to three and from four to school entry. Parenting education/support programmes were seen as part of birth to three services. This workshop had two primary purposes: to share the outputs of the CF project with regional colleagues for their critique and for their potential adaptation of the project where applicable, and to strengthen the regional networking (on POAs and other issues) prior to the regional conference scheduled for this purpose officially one year hence (see item #4, p.52).

The enthusiasm and energy displayed during the three days were encouraging signals of the state of forward movements in ECECD. The level of discourse, the positivism, and the models among countries for progressive action—despite limited resources and sometimes lackluster political will—were gratifying to all who attended. While there remained evidence from some countries of discouraging "turfism", and the discouraging fact that reports on some activities were "news" to fellow country representatives, in general, the spirit of open and useful sharing was remarked on by many and was urged to continue.

The programme for the three days was planned so that the delegates could meet via UWI's distance technology system (all could hear if not see each other) prior to the workshop. Two Child Focus newsletters summarized these meetings. The three days considered the following items:

- The national occupational standards for ECECD workers was developed as part of the CF project in collaboration with Jamaica's National Council on Technical and Vocational Education and Training (NCTVET). As there is a TVET regional strategy adopted by CARICOM, many representatives at this meeting were excited to see whether or not they could adapt these standards within their own systems of assessment and accreditation. (No such current systems exist for ECECD). These standards have been officially adopted for Levels I-III workers in Jamaica, and an assessment/accreditation system will be worked out over the next year.
- An Infant Curriculum (as the first completed section of a

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Curriculum for ECECD workers, to be completed in draft by the end of 1999) was developed to meet the new occupational standards, and in response to a near absence of guidelines (in Jamaica) for working with this age group (birth to eighteen months)

- Curriculum needs in general were discussed, the elements of curricula for both trainers and for the child's classroom were shared by a few countries, and options for sharing developmental work on curricula were debated. There was strong interest among many representatives for collaborative work.

Other topics of the workshop included Trinidad's approach to training trainers (where NGO and government monitoring personnel were integrated and built a monitoring system together); electronic networking and inputs to a pending regional ECECD website; regional models for programmes of parenting education and parent involvement; and service model building exercises.

3. *EFA Reporting activities for ECECD in the Caribbean*

The Caribbean sub-region's Coordinators for EFA Country Reports agreed to an attempt, sponsored by UNICEF, to include more than the basic two EC indicators for the Caribbean, in order to reflect some of the forward energy toward improved services. While the exercise (not surprisingly) did not produce much usable hard data, it engaged sixteen countries in creditable efforts to obtain data on the indicators selected. The exercise demonstrated to all who participated the critical need for good data systems to be put in place within national planning mechanisms in order to monitor and plan services. The data collection exercise was coordinated by CCDC and the sub-regional report prepared by consultant Leon Charles from Grenada. The results of the Caribbean exercise within the EFA reporting system places Caribbean colleagues squarely within the group of ECECD advocates for strengthening national and global commitments to Early Childhood interventions.

4. *The 3rd Regional ECECD Caribbean Conference, scheduled for July 10–14, 2000 in Jamaica is being planned by a Jamaica-based planning group, which is committed to ensuring that the conference is a truly regional exercise*

Reporting on nations' progress on Phases I and II of the Regional Plan of Action for ECECD will be central to the four-day conference (at the Jamaica Grande Hotel in Ocho Rios). It is the object of this meeting to include senior policy/planning personnel from each participating country for the last two days of the conference, so that they can receive recommendations from the first two days of workshops with senior programme administrators.

Other "offshore" items: Sian Williams represented the CCDC at the Childwatch International conference in Dunedin, New Zealand in July, and will be teaching a module of the Child Rights University Network course in Brussells in December. Janet Brown was a co-consultant for an evaluation of the Madrasa Resource Centres Project in Kenya, Uganda, and Tanzania in March–April 1999.

Future Plans

- Continuation of Technical Assistance contract: UNICEF (Caribbean Area Office) has committed to an extension of Sian Williams' contract to continue the work in support of regional

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plans of action for another two-three years. This promise of continuity beyond this first year is extremely encouraging.

- CCDC has applied to the Organisation of American States for grant funds in support of establishing regional data systems on services to young children and their families. If successful, 2000 would see hardware, software, and training supports in place for at least ten countries who would collectively devise, with a consultant, a basic model system for data collection that could be adapted for each country's use. Exchange visits within the region would also be part of this proposal to help build up a cadre of regional consultants for mutual support and learning.
- Out of the ECECD Conference 2000, CCDC is seeking support for a participatory reporting process on the ten regional plan of action purposes that could become a publication on Caribbean ECECD progress immediately following the Conference.
- There was sufficient interest at the Child Focus conference for CCDC to consider organising a Level III (Supervisors/Operators) course for regional application (either by distance education or through face-to-face local courses). CCDC is in pursuit of funds for this undertaking.
- CCDC hopes to apply UNESCO Cooperating Centres funds to support Newsletters/Case studies on a quarterly basis in 2000 for regional circulation.

Aga Khan Foundation/7-1205-098/Jean-Luc Ray

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MOCEF Activities for Central Asia

The Mother Child Education Foundation (MOCEF) is a Turkish NGO that works in the field of early childhood, parent, and adult education. MOCEF believes that every individual has the right to lifelong learning and a fair chance to education.

Since 1997, MOCEF has been serving as the Central Asian Regional Representative for the Consultative Group. In 1999, MOCEF signed an agreement with UNESCO under the UNESCO Early Childhood Partnership Programme and was appointed the Early Childhood Cooperating Centre for Central Asia.

In pursuing its primary objective in Central Asia, MOCEF has been working on two major shortcomings identified in the region: a lack of information on ECCD, and a lack of communication within the field of ECCD. Implementation of two major activities, a Study on Networking on ECCD in Central Asia conducted in 1998 and the Central Asia Literacy Forum held in Istanbul in June 1999, helped to further develop primary goals of the network.

Networking on ECCD in Central Asia

The purpose of the study, funded by the Aga Khan Foundation, was to obtain a broad-brush impression of the state of Early Childhood Care and Development—past, present and future, and to research the possibilities for facilitating a regional network on ECCD in Central Asia. Named contacts were encouraged to provide background data and information on ECCD and to identify areas in ECD most in need of support. Due to the time and funding constraints, only three countries were visited: Kazakhstan, Tajikistan, and Uzbekistan.

A summary of findings from the field study revealed that countries within the Soviet Block have extensive, centrally-controlled kindergarten systems in which most individual kindergartens share the features discussed below. They cater primarily to children between the ages of three and six- to seven-year-olds. Children under three are not normally placed in centre-based institutions because of extended paid maternity leave. The primary purpose of the kindergartens is to care for young children while women work. They are open for ten to twelve hours per day, during the whole year. Kindergartens also serve a monitoring purpose in terms of primary health care and nutrition. Most kindergartens are housed in purpose-built buildings and provide meals four to five times a day. Teaching is teacher-centred and aimed at socializing children to function in a collective society rather than in an individualistic one.

Since independence, a pattern of deterioration has emerged within the kindergarten system that is taking place at varying degrees. Many kindergartens have been forced to close. Buildings have fallen into disrepair and much of the equipment and materials have been stolen. With the introduction of a fee-paying system, the gap between high quality and low quality kindergartens is widening, with the rural poor (especially those with large families) being the hardest hit. The proven value of alternative ECCD models is not widely accepted in the region and many feel that childminding or parenting programmes are the poor relations of the superior kindergarten model. Observation and anecdotal evidence would suggest that certain core criteria are considered essential to maintaining quality kindergarten education: operation within a purpose-built centre; presence of factory-made (and uni-functional) equipment; all-day opening hours; and highly trained staff. This means that there may be a resistance to the more flexible community-based playgroup model, and it also means that despite being aware of declining attendance rates, central and local government focus on solutions that operate within the current kindergarten system.

The countries of Central Asia are familiar and supportive of ECCD, but it is believed that many countries would benefit most from exposure to other ECCD models as an alternative to the kindergarten system. This could be achieved by regular and effective information exchange, both in terms of documentation and through face-to-face contact. Secondly, agencies need to further investigate the opportunities for integrating ECCD within other programmes, such as health, rather than relying on uniform models.

Following the findings from the field study, correspondence, mainly via-email, has continued with certain agencies in the region. MOCEF has disseminated information and publications on ECCD to named contacts. However, these efforts have been insufficient for the needs in the area, therefore the Central Asia Literacy Forum was initiated to provide a forum for the exchange of information on ECCD.

Central Asia Literacy Forum

The Forum on literacy development was held in Istanbul on July 22–25 1999, with the joint efforts of MOCEF, UNESCO, the International Literacy Institute (ILI), and other agencies. The objective of the Forum was to review literacy problems from the perspective of lifelong learning. A major goal of the Forum was to consider how early childhood, literacy, and non-formal basic education programmes can assist in responding effectively to the new development needs of the region.

The Forum provided the opportunity for discussion among policymakers, researchers, and practitioners of Central Asia. The general focus of the Forum was lifelong literacy development, from early childhood to adulthood. Particular emphasis was given to the connections between non-formal education programmes for children, families, parents, and adults. Topics discussed during the Forum included curriculum development, policy development, gender issues, evaluation and assessment, and distance education, as well as language, literacy, and early childhood issues. Participants also discussed the topics related to innovative and integrated programme approaches, and to family/parent education.

The Forum brought together participants from different backgrounds: from literacy experts to representatives of donor organisations; the representation of various stakeholders ranged from high-level government officials to academics. The Deputy Ministers of Education from Armenia and Moldova participated and presented their country experiences.

The Central Asia Forum also provided the opportunity to make new contacts and to share ideas about creating links among the organisations working in relation to ECCD. During the Central Asia Forum, MOCEF organized a ECCD Central Asia Network Meeting. Sixteen Representatives from UN Organisations, the World Bank, and other international organisations, as well as various government officials from the region, attended. The aim of the meeting was to introduce the initiative of a Regional Network on ECCD facilitated by MOCEF, and to discuss the next steps of the initiative. During the course of meeting, the goals and objectives of creating such a network were presented to the participants.

Since 1997, MOCEF has been putting its efforts into building a regional network and into becoming more active in Central Asia. Although the organisations and agencies that were contacted have shown a great deal of support and enthusiasm, MOCEF has not been able to achieve some of its goals due to the limitation of resources.

The activities planned for the upcoming year build on our experiences to date, and on feedback from past activities, and take into account the priorities set out at the last Consultative Group Annual Meeting. Our initial efforts will still be concentrated on gathering information to build an effective and functional Network within the region, but we are also planning activities that will serve as a foundation for more functional and needs-based activities. To ensure continuous communication and information exchange with Partners and representatives in the Region, MOCEF has recruited a full-time person to serve as the Central Asia Director. The Central Asia Director will coordinate and monitor all of the Regional ECCD activities and will be responsible for collating and disseminating information on ECCD in Central Asia, and for networking and contacting with donors, policy-makers, academics, and NGOs in the field.

In addition, MOCEF now has a website: http://www.acev.org in both Turkish and English, with plans to have the site in Russian. MOCEF will also be publishing a network newsletter for the region. The aim of the newsletter is to disseminate ECCD information and to improve communication between Central Asian organisations.

A Special Report from MOCEF: The Role of the NGOs after the Earthquake and Lessons Learned

The alarm clocks had been ringing since 6:00 a.m., and nobody was turning them off. This was the only noise that could be heard during the early morning in the Turkish towns hit by the terrible earthquake. The very next day, thousands of volunteers reached the areas to help the victims. Nobody knew the real picture of the event until they actually saw it. The massive destruction took the lives of many families and caused a great economic loss that will be very hard for the Turkish Government to recover from.

The earthquake (at 3:02 a.m., August 17th) caught many people in their sleep. The magnitude of the earthquake was very strong, leaving devastating marks on people's lives. Official figures for the death toll went up to 15,300, with additional bodies still buried under the collapsed buildings.

The aftermath of the event shows that Turkey learned some crucial lessons in terms of disaster response. The work has already started to change existing community development as well as disaster response. There are many issues that will require reconsideration, but there are specific areas where dramatic changes are expected. One of the major outcomes of the event was the role of the Non-Governmental organisations (NGOs) in community work and disaster management. As the government response to the earthquake was considerably late, volunteer groups and representatives of various NGOs were the first to reach the disaster areas to help those in need. NGOs, with their flexibility and transparency, became the pioneers of rescue teams and relief work.

NGOs became an alternative to government efforts in assisting

earthquake victims. The services provided by NGOs included rescue efforts, supply collection and distribution, inspection of buildings, and provision for health, food, shelter, and rehabilitation services. NGOs also initiated programmes designed for the special health, social, and rehabilitation needs of the victims. Special focus was given to children by providing them with play tents and toys, and volunteer experts helped them cope with the trauma caused by the earthquake, such as the death of loved ones.

As they are in many situations, children are the most vulnerable group affected by an earthquake. The depth of the implications of such a disaster are more serious for children. Children, in general, do not comprehend the actual event and thus feel confused. Because earthquakes strike quickly and without prior warning, these events can be frightening for adults, but for children they are traumatic. A major difference between adults and children is their ability to cope with the outcomes of the resulting stress. Unlike adults, children's fears are drawn not only from the reality of the event itself, but also from their imagination, and these fears and emotions need to be addressed seriously.

Psychologists, pedagogues, sociologists, and social workers played a critical role in implementing programmes with NGOs especially designed for traumatized children. Various rehabilitation programmes were designed to guide parents, teachers, and other relatives to help and understand the needs of a scared and anxious child. Most of the programmes focused on the fact that feelings of fear are healthy and natural and the reactions are normal. Children can show symptoms of Post Traumatic Stress Disorder (PTSD) due to the disaster, such as guilt, anger, and rage.

Prior to the programmes being designed, international experts from various countries, such as Israel, Norway, and the United States of America, provided training sessions for professional volunteers. The training programmes were then adapted and modified according to the situation, needs, and the culture of the Turkish victims. Topics included trauma identification, memory exposure, cognitive restructuring, and coping strategies and techniques. Various rehabilitation programmes for children operated by NGOs and their volunteers began immediately in the affected areas. The response of the community was great as they showed deep trust and support for the work of the volunteer groups.

Although, NGOs pioneered recovery efforts among traumatized children, their initiatives need to be carefully assessed. During the course of the rehabilitation programmes, obstacles were faced by the experts. First, the continuity of the programmes suffered, as part-time volunteer were necessarily utilized in the initial phase of the rehabilitation efforts. Secondly, the Turkish experts, although they received training from well-known experts, did not have the complete technical expertise on rehabilitation of traumatized children.

Follow-up and monitoring of the programmes became another issue of concern, not only due to the obstacles faced regarding continuity but also due to fact that populations were migrating to other places to seek better immediate living conditions. Under such circumstances, it was hard to measure the effects of programmes, as well as ensure that quality control measures were in place for continuing programmes.

In addition, physical conditions in the disaster sites where the rehabilitation programmes were organized were not suitable to conduct the programmes more effectively, despite the efforts of both governmental and non-governmental groups. To solve this problem, various NGOs tried to formulate "civil groups" to work collaboratively in the areas. However, these efforts resulted in a duplication of efforts due to a lack of coordination and partnership among the NGO groups.

These limitations in designing specialized, integrated, and effective rehabilitation services, especially for traumatized children, require strong collaboration among organisations. NGOs recognized the importance of improving organisational capacity, managerial skills, and technical expertise in disaster management. Leadership is another significant role that Turkish NGOs can play. NGOs understand the need to develop better relations with the community and the government. They are more flexible and are accepted by community-oriented groups. However, it is necessary for Turkish NGOs to strengthen their communication and collaboration among the sectors, especially during disaster scenarios.

Government officials are learning how to attend to emergency situations in a more organized and timely manner. The restructuring of national organisations, such as the Red Crescent of Turkey, and furnishing up-to-date technology are essential tasks on the Turkish agenda. The Turkish Government also recognized the crucial role NGOs play in disaster situations. The earthquake gave a chance for Turkish NGOs to show their capabilities and effectiveness in community development and relief programmes. To further this, NGOs will advocate and support the building of organisational competency, effective partnerships, and technical expertise in disaster management for all sectors in responding to the needs of disaster victims—a complicated matter which requires full partnership and good will between the government and non-governmental organisations.

The latest devastating earthquake experience taught Turkey the importance of being ready for such a disaster. After the disaster, it was and continues to be, important to respond to victims' health, psychological, and social needs. By their immediate and sensible response to the event, Turkish NGOs have become more credible and accountable to the community and the government. Providing services in the locations hit by the earthquake assisted NGOs and the government to discover their own organisational and technical weaknesses. From this point forward, Turkish NGOs recognize the significance of strengthening their expertise, building technical and organisational capabilities, and preparing themselves to respond to and better serve communities in crisis.

News from the International Secretariat

Aga Khan Foundation/3-1867-026/Jean-Luc Ray

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Central and Eastern European Network

Central and Eastern Europe are usually looked at as having similar problems and as facing similar difficulties in the course of transition to market economy. There have been some broad, general attempts to map the situation of children in these countries, but these are not specific nor systematic enough to pinpoint similarities and differences in the systems and thus provide a base for a joint effort in the interest of children. Only a few comprehensive reports covering children's issues in this region have been published (by international agencies), and there is not much widely available information about or contacts with people who are active (internationally or on a national level) in the early childhood field in these countries. Nonetheless, we are aware that there are interested colleagues in several of these countries who could form the core group of a regional network.

Despite the communication difficulties, which have become much worse with colleagues in the war affected countries, there has been a positive response to the idea of setting up an Early Childhood Care and Development network. It is commonly felt that once the network is set up and begins to function, it will be an important vehicle to make children's issues more visible, to address problems, and to carry on effective advocacy work. It is especially vital since, in most of these countries, NGOs are not strong enough to be able to sustain longer term and widespread work on their own, though one of the aims of the networking activities could be to define their role at the beginning.

Setting up an ECCD network in Central and Eastern Europe would meet these needs and would facilitate the coordination of work in the interest of children. Several organisations have already expressed an interest in supporting and collaborating with the ECCD network in this region.

The Consultative Group on Early Childhood Care and Development (CG) has worked with regional representatives all over the world for many years. The idea of developing an Eastern European network emerged in the course of the collaboration between the Consultative Group and the Pro Excellentia Foundation. The CG provides support through its regular activities, which include sharing information through publications and through its website, and through the yearly meetings of the CG consortium. The regional ECCD network will have an opportunity to use the CG's website to distribute information.

Save the Children Norway and the UK regional office in Budapest have been supporting the development of the network, and all the efforts which have been taken to date toward launching it. Financial support has been given to organize a first regional meeting for those who can become the core group.

UNESCO has made a commitment to working with the regional representatives of the Consultative Group, which includes the Pro Excellentia Foundation. In addition, an agreement has been signed with the National Institute of Family and Children in Budapest, which will cooperate with the Pro Excellentia Foundation in delivering regional programmes, to function as a UNESCO Cooperating Center.

UNICEF and the World Bank, as CG consortium members, also expressed an interest in the regional network. UNICEF distributed information to its country offices about the emerging network. Some of these offices have already made a promise to contribute work for the network and to attend the regional meeting on their own funding. Further discussions will be carried on with these agencies.

The Balkan Child Rights Initiative is a natural partner for the ECCD Forum. Both are attempts to organize networking and information sharing, though in slightly different interest areas, which nonetheless, overlap. BCRI has committed itself to cooperate and to share information.

Marta Korintus, on behalf of the Pro Excellentia Foundation, has made a preliminary, rough assessment of the current situation in some countries with the help of colleagues in those countries, and through this exercise has identified some common and/or separate interests and needs in the region. Information about the plan for a regional ECCD network and a questionnaire were sent to approximately thirty-five people in sixteen countries, who were asked to respond rapidly.

Fourteen responses from eleven countries have arrived; these responses have provided the basis for identifying common issues, overarching issues, and suggestions for activities for the network.

Central and Eastern European Early Childhood Care and Development Meeting

The first regional ECCD meeting was held October 24–28, 1999 in Budapest, Hungary. Participants included those who are interested in becoming involved in the network, those in a good position to provide an overview of children's services in their country, those who have expertise in ECCD, those who may be able to influence policy regarding children, and those who might be interested in participating in a regional research project. The working language of the meeting was English.

The first two days of this meeting were devoted to discussions about the situation in the countries within the region, common issues, and the identification of activities which could be done together as a networking group to help children and their families; plans for working as a network and for joint projects were also developed. Participants discussed the future of the new Central and Eastern European ECCD network, based on definite ideas they wanted to develop and would like to see realized. The aim of the discussion was to develop an agenda for the network for the year 2000 and 2001, which was discussed with the representatives of international organisations on the third day. There were also opportunities to make site visits.

See *http://www.ecdgroup.com* under regional initiatives for full report.

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News from the International Secretariat

Further Development of the LA Network

CINDE, as a UNESCO Latin American Cooperating Center of Early Childhood and Family and as a regional representative of the CG, obtained a $100,000 grant in 1999 from USAID, through UNESCO, to provide support to the Latin American regional network over a three-year period. Three activities for the CC in the region and as part of the regional cooperating centre agreement will be to undertake the following:

- Develop a regional website in Spanish that will complement existing Spanish language sites to disseminate information on programmes, policies, and best practices (this site will be linked to the CG website).
- Organize the third Latin American meeting on the network of ECCD networks.
- Cooperate in the organisation of a pilot study (which began in October 1999) in an ECCD programme in El Salvador.

Colombia case study on the use of ECCD indicators

CINDE is working in collaboration with the Consultative Group as part of the multi-country (including Namibia, Philippines, Jamaica, Nepal, Bolivia) project entitled, "In Search of Early Childhood Care and Development Indicators: A Contribution to the EFA Year 2000 Assessment". The purposes of this project are to 1) complement the information about ECCD that will be collected as part of the regular EFA Assessment process in order to more fully describe the status and progress of ECCD, and 2) to expand and refine the national definitions of indicators and measures for assessing ECCD and to identify changes in data systems needed to operationalize the indicators. The work includes:

- Proposing a set of possible indicators for assessing different dimensions of early childhood care and development (ECCD).
- Reviewing existing systems of data collection and available measurement instruments that are being, or might be, used to provide the information needed to create the proposed indicators.
- Organizing a meeting within the country to discuss, critique, and identify the proposed set of indicators and the sources of data identified.
- Collecting the data required to produce, in so far as possible, the ECCD indictors using available sources.
- Collecting additional information that sheds light on the status of young children and of ECCD programmes in Colombia.
- Preparing a country report presenting results from each of the above activities.

Results of this exercise will be presented at the EFA regional meeting to be held during the first week of February 2000 in the Dominican Republic.

CINDE also represented Colombia in the 4th "Meeting of the First Ladies of the Americas" held in Ottawa, Canada, September 30th to October 1st, 1999. For the first time in its history, the meeting was complemented with a fair number of NGOs, two from each country in the region representing ECCD, and women's health programmes. Two themes have been selected by the first ladies as areas in which to develop programmes within their countries over the next two years. There was an exhibit of materials from each NGO and a good opportunity to exchange ideas.

Aga Khan Foundation/6-0119-021/Kay Heilig

Activities of the Partners

PLAN International—*Welcome to PLAN International as a new partner!*

ECCD in Programmes Supported by PLAN International

PLAN International, known as PLAN, is a child-focused international non-governmental development organisation. PLAN has been supporting children in the developing world since 1934. PLAN's programmes today cover over one million children directly in forty-three countries in Latin America, Africa, and Asia. The key components of PLAN's programmes are habitat (including water and sanitation), health, education, livelihood, and building North-South relationships and cooperation through child sponsorship. Both the education and health programmes include support to ECCD. The educational projects also support primary, secondary, and adult education. The programmes are coordinated by regional offices located in Quito, Guatemala, Nairobi, Dakar, and Chiangmai.

Out of the total number of children that PLAN programmes assist, approximately eighteen percent are between the ages of zero to six. The Under-Five Mortality Rate (U5MR) in countries where PLAN is operating ranges from nineteen (Sri Lanka) to 320 (Niger). The average U5MR for countries covered in West Africa is 190. Therefore ECCD is an important part of PLAN's health and education interventions.

A desk research on PLAN's support to ECCD conducted in April 1999, reveals that child survival is part of all of PLAN's programmes. It is also one of the key components of a global health result package being implemented under USAID funding by a consortium comprising of PLAN, CARE, SCF (US), and PATH. As envisioned in the health domain, strategic objective efforts are underway in many countries to ensure that early childhood stimulation is incorporated into child survival programmes, assuring integrated health and education interventions in our ECCD projects. For example, early stimulation is an important part of PLAN's healthcare programmes in Colombia. Child survival programmes in India include mothers' education and responsible fatherhood. Casa Base and Casa Cuna in Nicaragua, Village Kindergarten in Indonesia, Bal Kendra or Children's Centre in India, and the Parent Effectiveness Service in Philippines are a few examples of PLAN's interventions in ECCD.

Steps are being undertaken at the national, regional, and international levels to remove the gaps in terms of targeting, integration, and conceptual clarity of support staff, monitoring, and evaluation, etc. that were identified in the ECCD programmes. More important among these is addressing the survival as well as the early intellectual stimulation needs of children in the range of birth–three years. At present, the health interventions tackle the survival of children in this age bracket. In the future, PLAN is hoping to include home/community-based early stimulation activities in all of its programmes. Training and support of careers is being considered as one of the major interventions for this.

Construction of preschools and the feeding of children were the main interventions of PLAN in many countries in the past. However, experiences in countries such as Zimbabwe, Nepal, Indonesia, etc. have revealed that their contribution toward children's survival and stimulation was limited.

In light of many years of experience of supporting ECCD programmes and the lessons learnt in the process, PLAN will pursue the following options to improve the quality of the programme it supports:

- Give higher priority to ECCD.
- Give importance to early stimulation interventions for children aged birth–three years.
- Formulate policies to cover children "at risk" through ECCD activities.
- Include early stimulation activities in the training/education of caregivers.
- Initiate steps to improve the conceptual understanding of PLAN staff about ECCD.
- Network with other actors and participate actively in the Consultative Group on ECCD (CG).
- Use CG as an entry point for ECCD.
- Involve school-aged children and alternative caregivers in ECCD projects.

The Aga Khan Foundation

The Aga Khan Foundation has emphasised early childhood care and development for over fifteen years. It was one of a handful of donors who recognised early on the importance of the first years in shaping and influencing later development. AKF's Young Children and the Family programme seeks to promote initiatives that are community-based and which take into consideration the physical, emotional, social, spiritual, and cognitive needs of the child. The Foundation believes that where there is significant community and participation, benefits accrue to both children and their communities.

The Foundation provides grants to NGOs and, at times, governments in those countries approved by its Board, including Kenya, Tanzania, Uganda, Bangladesh, India, Pakistan, and Tajikistan, as well as Portugal, the UK, USA, and Canada. Over the last decade, much of the work undertaken in the Young Children and the Family programme has been led by intermediary-level NGOs that serve as ECD support organisations to local community groups and organisations, such as preschools, child care centres, parent's groups, etc. These NGOs develop and provide appropriate training and curriculum materials for teaching, learning, and caregiving; they offer regular follow-up support to those involved in delivering the ECD services; and they work with the communities to monitor and improve what is happening in the project. Increasingly, the sustainability of these community-level and intermediary level organisations has become part of the discussions for their present and future work. For AKF, sustainability of ECD institutions includes strengthening technical and organisational capacities, as well as developing a range of strategies and mechanisms to better ensure the financing of their programmes and institutions.

As the decade draws to a close, AKF staff has been reviewing past and current work and thinking about ways it will move forward in future. Work related to establishing and strengthening NGO ECD resource/support centres is likely to take on added energy through the help of the Foundation's new programme area: NGO Enhancement. Issues of access to different kinds of ECD programmes (especially for 0–3s), sustainability, and quality across various contexts remain important. Lessons are being drawn from both AKF and other agencies/organisations, including those in the CGECCD network, who work in the field for input into the new strategy.

Update on selected AKF projects

In 1999, AKF's USA office provided seed money to one of the CG's emerging regional network—Central Asia. Related to this endeavor, Kathy Bartlett, AKF Programme Officer, attended the Seminar on Lifelong Learning held in Istanbul earlier this year (see further details on these activities under the regional report by MOCEF). Kathy worked with the conference organisers to put together a panel that discussed the work of the Consultative Group on ECCD.

The East Africa Regional Madrasa Programme, now operating through Madrasa Resource Centres (MRCs) in Zanzibar, Kenya, and Uganda, and a coordinating office, has been reflecting and reviewing where it has come from and where it might go in the future. Several things have assisted in this process: an internal organisational self-assessment and ongoing monitoring of the community preschool programmes in each country; an external evaluation carried out in the first half of the year; and discussions on an evolving draft concept paper for the future of each of the regional programme—including an analysis by each MRC regarding its own development. As a result, MRC staff and the Regional Office Coordinator and Researcher have moved forward significantly in terms of their own confidence as ECD support centres and in terms of defining their strengths and remaining challenges. A small group representing the different aspects of the MRC programme (ECD training, community mobilisation and development, and research) were able to share some of their thoughts and lessons learned during the World Bank organised International Conference on ECCD held in Kampala, Uganda in early September.

Another AKF supported community school programme which is co-funded by USAID, Improving Pre- and Primary Education in Sindh (Pakistan) also had a review undertaken of their work as they moved into their second phase. Similar to the Madrasa programme, the project works with parents to establish community schools. The women teachers are drawn from the local Sindh communities and are provided with training and regular follow-up support by the project team based at Aga Khan Education Services in Karachi. Both the Madrasa and Sindh reports discuss the evolution and process of these two community school programmes and the role of the support NGO (the Madrasa Resource Centres and AKES, Pakistan). Each is fostering quality ECD and primary education programmes within communities and providing opportunities for women to assist in the management of the local schools and to work as teachers, trainers, and community mobilisers. Another common feature of both programmes is the testing of how different schemes, such as community endowments or savings, might assist in the longer-term sustainability of the community school. Exchange visits have been organised between the two programmes and AKF hopes to draw out further the lessons from these and other similar AKF projects for wider dissemination in the coming year.

Save the Children/USA

In 1999/2000, Save the Children/USA will continue to strengthen the quality and coverage of its efforts in ECD in the thirty-nine countries in which the organisation is currently engaged. Anticipated highlights for the coming fiscal year are:

- summative analysis by Dana Burde of SC's programme of community-based ECD in Croatia, Bosnia, and the Republika Syrbska;
- launching of a longitudinal study on early child development programmes in Nepal and Bangladesh;
- continuation of the Nepal childrearing study;
- programme exchange between ECD specialists in El Salvador and Bangladesh on their respective approaches to ECD in the community setting;
- fourth Programme Learning Group in mid-2000, probably in Nepal, bringing together SCF Education specialists, including ECD specialists, from around the world to share experience and generate new learning;
- planning and implementation of emergency ECD intervention in war-affected areas in Kosovo;
- launching of community-based ECD component within the Guatemala Bilingual Education Project.

UNESCO

Promoting early childhood education

Background. As a follow-up to the findings of the Mid-Decade Review Meeting on Progress Towards EFA (Amman, June 1996), a fresh impetus was given to developing early childhood education as an integral part of basic education by mobilizing new partners in all regions. Major achievements include the launching of a regional network of early childhood specialists in French-speaking Africa; a resource centre in French-speaking Africa (Mali) and a training centre in Europe (Amsterdam); and a cooperative programme to develop policy recommendations for the Asia-Pacific region. Initiatives have also been taken to develop regional networks and resource centres in other regions and to develop, in cooperation with UNICEF and other international partners, a common inter-agency early childhood communication strategy.

Strategy. Programmes in the field of early childhood education will be planned within the conceptual framework of the "Strategic Plan for UNESCO's Early Childhood and Family Education Programme".

Priority will be given to regional and subregional collaborative actions in cooperation with United Nations agencies, in particular UNICEF, NGOs, National Commissions and expert groups. Efforts will be undertaken to integrate policies and systems of early childhood care and education and to strengthen low-cost family and community based early childhood care and education programmes.

Results expected by the end of 2001

- National policies and capacities for integrated early childhood and family education will be reinforced in ten countries;
- Regional and sub-regional networks, expert groups, and resource centres for early childhood and family education will be supported, particularly in Central and South-East Asia, Africa, and the Arab States;
- Innovative experiences and best practices in the field of early childhood and family education will be widely shared among policy-makers, practitioners, and experts;
- Cooperation and synergy between UNESCO initiatives and those of other donor agencies at the national and local level will be consolidated.

Main activity areas for 2000–2001

1. Development of indicators of early childhood education and development: UNESCO considers that indicators (not statistics) of early childhood education and development are the most useful and basic tool that could allow policymakers in the countries to make clear judgements of their own situations in their respective areas and motivate them to improve on existing conditions. In particular, global indicators of early childhood education and development will be useful for allowing policymakers to compare their situations with those of other countries, and also for providing them with a sense of a nation's success or failure in deploying resources to improve the targeted areas. Indicators of early childhood education and development, in short, will be the tool that can definitely help abate the currently rampant skepticism among policymakers about the value of investment in early childhood education and development.

Recognizing this importance, jointly with the UNESCO Institute of Statistics, UNESCO's Early Childhood and Family Education Unit intends to implement a programme in the next three biennia (2000–2005) to strengthen national capacity for producing and managing early childhood statistics and indicators. This programme is undertaken to help boost public and private investment in early childhood programmes in Member States and to enhance their early childhood policy-making process. It also intends to facilitate international and regional cooperation in early childhood programmes.

Similar initiatives are being made by other international agencies including the World Bank, UNICEF, and the Consultative Group on Early Childhood Care and Development. Currently, UNESCO's Early Childhood and Family Education Unit is seeking to establish an inter-agency task force on early childhood statistics and indicators.

2. Family Education as integral part of early childhood education. Consistent with our emphasis on the need to " normalize " non-formal approaches to early childhood education and care, we intend to do something about family/parent education. Focusing on the fact that the definition or scope of this concept is not clear even to us working in the agencies, we are thinking of launching an effort to come up with an inter-agency, agreed-upon definition of family/parent education (just like was done a few years ago for the concept of early childhood education itself), and then promote it as integral part of early childhood education and care.

Furthermore, family/parent education in member states is not integrated at the policy and systems level as part of early childhood programmes. Nor is there a clear intellectual direction concerning how to view parents vis-à-vis the state as providers of early childhood experiences and how to build partnerships between them in light of the political, socio-economical and cultural changes of the developing world. To improve this situation, a project is being developed to generate and implement policy information and knowledge on parent/family education that are relevant to the situations of the developing world.

3. Early childhood clearing house and networking. Besides continuing to facilitate access to early childhood information through conventional and electronic means of information exchange (e.g., databases on early childhood organisations, policies, statistics), and to reinforce early childhood networking (e.g., support to the Early Childhood networks and close partnership with the Consultative Group on Early Childhood Care and Development), two main activities will be initiated:

- Develop a series of publications and multimedia documents to reinforce early childhood advocacy and communicate policy debates and information to targeted audiences (including policy-makers, parliamentarians, community leaders, trainers, caregivers, families, parents, etc.). The aim of this line of action is to provide practical and focused points of views and messages on early childhood and family issues to different target groups by "interviewing" members of these target groups (such as well-known politicians and parliamentarians, letting them express their feelings and thoughts on these topics, and, since they will be using the "same words" as their peers, the message will be far more effective in mobilizing others within their target group). These points of view will be compiled in an attractive booklet form, but they will also be used in audiovisual formats (for radio messages, preparation of multimedia presentations, etc.). This activity will provide opportunities to strengthen the dialogue with civil society on these issues but also to develop collaborative efforts with other sectors of UNESCO (such as the EFA Forum, UNESCO Radio programmes, ASP, etc.) and to involve UNESCO field offices and National Commissions.
- Expand UNESCO's early childhood clearinghouse activities on the Internet through the creation of an Access to Early Childhood Information section within UNESCO's Early Childhood web pages. This Access to Information section will provide both practical access to tool kits (online versions of early childhood training manuals, such as the UNESCO/Bernard van Leer training pack, online versions of the regional early childhood organisations' directories and other practical documents), a focused access to selected topics (indicators/statistics, parent/family education, community mobilization, etc.), providing for each an overview of activities/programmes carried out in those topics and building on the results of the Best Practices survey launched this biennium, and access to regional knowledge banks (that would be developed jointly with the regional Early Childhood Cooperating Centres).

New publications:

- *Le carnet du coordinateur* No. 20 and 21 (*Coordinators' Notebook* 20, "Gender Issues", and 21, "Transitions and Linkages", translated into French).
- El desarrollo del niño en la primera infancia: echar los cimientos del aprendizaje (thematic portfolio in Spanish).
- Russian version of Eight is too Late (early childhood information sheets).
- ECF Series No. 10 Culture, enfance et éducation préscolaire (French). Report of the expert meeting on culture and early childhood.
- ECF Action-Research in Family and Early Childhood Monograph No. 10—Jouer, jouer, jouer: jouer au fil des jours avec des enfants de 3 à 6 ans (French). On easy to make toys and games.
- Grandir et changer—un guide pour les parents en matière de développement de la petite enfance (parenting video support material). The French version of the parent materials written by Cassie Landers for the UNICEF parenting videos.
- And from UNESCO Press, the French version of the Early Childhood Training Pack published by BvLF/UNESCO has just come off the printing press.

Ready to Learn: International Center on Care and Education of Children

Update on Ready to Learn Activities, June 1999

The Ready to Learn International Center on Care and Education of Children focuses attention on the widespread problem of inadequate care and education for children birth to eight in developing countries. Ready to Learn provides support to service providers, child advocates, policymakers, and donors in order to improve the quality of information programmes and policies addressing physical, psychosocial, and cognitive growth of children in the most cost-effective manner.

We work in partnership to carry out needs assessments, policy analysis, research, strategic planning, programme design, technical assistance, and training. Ready to Learn combines experience in early childhood development, maternal and child nutrition, and education. Our approaches are collaborative and are intended to build capacity and long-term viability for the institutions that serve children and families.

The past year has been an exciting one! We have published some new research, conducted an informative dialogue, and are now involved in assessing and designing several early childhood development projects.

Programmes and initiatives:

- UNICEF—Assist UNICEF ESAR with staff and counterpart training for UNICEF's Early Childhood Care, Survival, and Development Initiative.
- Government of Uttar Pradesh and the World Bank—Conduct a baseline survey of preschool and childcare programmes in Uttar Pradesh, preparatory to action this fall.
- USAID/World Bank—Provide technical support on child nutrition and development to programmes in Baluchistan, Uganda, Kenya, and India.

- World Bank/Nepal—Work with Ministry of Education on strategic planning and provide technical assistance on childcare for girls' participation in primary schools.
- USAID—Assess care and development of young children affected by HIV/AIDS.
- Cognitive and Psychosocial Development in refugee camps in Sudan (pending funding)—Develop interventions, train trainers, assist relief workers.
- World Bank—Review communications initiatives geared toward parents and programme managers, excluding entertainment, advertising, or education messages targeting the children themselves.

Publications:

- "Qualities of Caring," by Chloe O'Gara, Diane Lusk, Judy Canahuati, Gary Yablick, Sandra Huffman. This paper is one in a series on early child development and discusses care for infants and toddlers in a variety of group care programmes in several developing countries, World Bank, Washington, D.C., 1999.
- "Care of Young Children as an International Policy Issue: Summary Report," by Cassie Landers. Report on an international, cross-disciplinary dialogue, Nov. 1998.
- "Interventions to Improve Complementary Food Intakes of 6–12 Month Old Infants in Developing Countries: What Have We Been Able to Accomplish?" By Laura Caufield, Sandra Huffman, and Ellen Piwoz (To be published in Food and Nutrition Bulletin), 1998.
- "The Case for Promoting Multiple Vitamin Mineral Supplements to Women of Reproductive Age in Developing Countries," by Sandra Huffman et al. (Submitted to Food and Nutrition Bulletin), 1998.
- "Improving Infant Feeding Practices: Programmes Can be Effective!" by Sandra Huffman, Cynthia Green, Laura Caulfield, Ellen Piwoz. Kuala Lampur, Asian Nutrition Conference, Nov. 1998.

Presentations:

- World Net television and Voice of America panel interview on radio and television call-in show, Conversemos, discussing early childhood development in Latin America, 1999.
- Indicators and Quality of Education Programmes by Chloe O'Gara. Presented at Basic Education in Emergencies and Transition Situations Conference, Washington, D.C., March 15–17, 1999.
- Programmes on Child Development and Infant Well-being by Chloe O'Gara. Symposium for Christian Children's Fund, Honduras, on cognitive development of young children, Tegucigalpa, Oct. 1998.
- Improving Complementary Feeding in Kenya through Fortified Complimentary Foods, by Sandra Huffman, PAHO, Washington, D.C., April 1999.
- The Role of Multiple Micronutrient Supplements in Safe Motherhood and Improved Pregnancy Outcome by Sandra Huffman. Presented at STZ-UNICEF-SEAMO workshop on micronutrients and safe motherhood. Singapore, Oct. 1998.

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ECCD Resources

Publications

The Early Assistance Series
Berkeley, California: The Hesperian Foundation, 1999

The Hesperian Foundation announces new guide books for parents on early intervention for children with disabilities.

The Hesperian Foundation, publisher of *Where There Is No Doctor, Disabled Village Children,* and other internationally-popular guides to community-based healthcare, is about to publish the first in a new series of books on early intervention for children with disabilities. *The Early Assistance Series* will consist of six short (150 pp), disability-specific books that teach parents and other primary care-givers daily activities they can do to stimulate development in children under five who evidence signs of disability or developmental delay. The books will help parents assess the extent of their child's disability, stimulate development with learning activities, understand what causes disability and how it can be prevented, and work with other parents and community members to improve services for children with disabilities. The books will also address the emotional needs of parents raising a child with a disability. The books will be very simply written and heavily illustrated, and will be published in English and Spanish. Book topics will include: blindness/vision impairment; deafness/hearing impairment; children with cognitive delays; children who are victims of war and other severe violence; children with emotional and behavioral disorders; and children with multiple disabilities.

Hesperian is developing the books in collaboration with community-based rehabilitation and parent groups, early intervention experts, and development organisations throughout the world. An international advisory committee reviews each book as it is drafted; revised materials are then pre-tested with groups of parents and health/rehabilitation workers in ten to twenty countries. Further review and testing are carried out as texts are changed to more accurately meet the needs of people working at the grassroots level. Early Assistance Series collaborators to date include UNICEF, Plan International, the Hilton-Perkins Programme, DANIDA, and Save the Children field staff, among others. At the grassroots level, parent and community-based rehabilitation groups in fourteen countries reviewed the draft book on vision problems. They were very enthusiastic, and made valuable suggestions for improvement.

Hesperian will publish the vision book in early 2000; subsequent titles will be published through 2003. Each Early Assistance book is expected to cost between $5 and $7.

For more information or to place a book order, please contact: The Hesperian Foundation, 1919 Addison St., Suite 304, Berkeley, CA 94704-1144. Tel: (510) 845-1447; Fax: (510) 845-0539; Toll-free inside USA: (888) 729-1796; E-mail: bookorders@hesperian.org

Websites/E-Letters

ECD Online Newsletter

Washington, D.C.:
The World Bank, 1999

Due to a large demand for the Newsletter featured in our ECD website, we have now created a free online subscription for those interested in regularly receiving our Newsletter. The current issue features (a) the New Zealand's Te Whaariki—Early Childhood Curriculum, and (b) the Report from the Early Years Study, which led to the appointment of Ontario's (Canada) first Minister Responsible for Children and the creation of the first Children's Secretariat in Ontario's history.

You can access the Newsletter directly by: http://www.worldbank.org/children/nl0799.htm

To enter your coordinates to our Newsletter distribution list: http://www.worldbank.org/children/sign.htm

Most of you already have received our pre-registration brochure for the Year 2000 conference on Investing in Our Children's Future. You can also register on line by: http://www.worldbank.org/children/register.htm

United Nations Website for Africa

United Nations Office for
the Coordination of
Humanitarian Affairs, 1999

Did you know the United Nations Office for the Coordination of Humanitarian Affairs (UN-OCHA) is now hosting a free daily humanitarian news update on sub-Saharan Africa on the World Wide Web?

On the site, you will find original news reports, maps, and images covering all the latest developments in the region brought to you by UN-OCHA's Integrated Regional Information Network (IRIN)—and it is all available right now at http://www.reliefweb.int/IRIN .

The site is updated with Africa's latest humanitarian, development, social, economic, and political information three times every day, and also includes an extensive archive, reports from other humanitarian agencies, a link to ReliefWeb's search engine and a form to subscribe to IRIN reports by e-mail.

So go ahead and bookmark http://www.reliefweb.int/IRIN today for your daily humanitarian information update on sub-Saharan Africa.

ADF E-mail News

African Development
Foundation, 1999

The African Development Foundation has established an e-mail list to provide information on ADF's work. We encourage readers to join the ADF list. We plan regularly to provide news about individual projects in the fourteen countries in which we work as well as references to new information on ADF's web page. You will not receive a large amount of e-mail from ADF. ADF's new web page includes detailed information on the Foundation, as well as pieces of immediate interest. The web page is at http://www.adf.gov. In order to be placed on the ADF e-mail list, put your e-mail address in the window at the bottom of the ADF web page and click "Submit".

CD-ROMs

35 Years of Early Child Development in the Caribbean

Washington, D.C.;
The World Bank, 1999

This CD-ROM contains an annotated bibliography of publications on topics on children's development and the effects of early interventions. It covers culture, child rearing practices, the environment in which the children live, the impact of cognitive development and schooling, the needs of children with disabilities, the effects of ill-health, neglect and abuse of children's early development and schooling.

Early Childhood Counts: Programming Resources for Early Childhood Care and Development

Created by The Consultative Group on Early Childhood Care and Development, in collaboration with The World Bank Institute and produced in partnership with Aga Khan Foundation, Bernard van Leer Foundation, Christian Children's Fund, UNICEF, and UNESCO, 2000

Aimed at development professionals, program planners, trainers, policymakers, and child advocates, this resource kit of materials on Early Childhood Care and Development offers tools for developing a wide range of programs to strengthen supports for young children, their families, and communities. The materials on this CD-ROM can be used to support program planning, training, advocacy work, and self-study, and can serve as a resource library for development professionals working in the "Majority World" (wherever children are living in poverty and at risk of impeded development).

CONTENTS:

- *Programming Guide:* An easy-to-use 391-page guide that details the preparation, planning, implementation, financing, monitoring, and evaluation of diverse ECCD programming strategies.
- *Media Materials:* Two media sections (Why Early Childhood? and What is ECCD?) include videos, slide shows, and fact sheets, aimed at raising awareness about the need for attention to ECCD.
- *Library:* Over 300 background texts, program examples, and print resources on ECCD are included in full. A searchable database helps you find what you need.
- *Self-guided Course on ECCD:* Work through the Programming Guide systematically on your own or together with colleagues, or pick and choose the topics relevant to you.
- *Trainer's Tool Kit:* Use the theme-clustered materials to develop training workshops; present the multi-media shows to groups; print and distribute handouts and background materials; assign portions of the Guide for reading and discussion; cut and paste text to create your own customized training materials.
- *Advocacy Pack:* Present multi-media shows one-on-one or to groups of decision makers and key stakeholders. Through its clickable Table of Contents, the Programming Guide offers you a summary of key themes and processes, which you can present to diverse audiences.
- *Resource Library:* Search the database by topic, region, population to be served, sponsoring agency, or other parameters to locate the information on research and practice in ECCD most useful to you. Read document abstracts and tables of contents to help you make your selections. View Acrobat.pdf documents on screen, print, save, e-mail, or cut and paste documents and excerpts to support your work.

See the CG website *www.ecdgroup.com* or the insert in this issue of the *Coordinators' Notebook*, for ordering information.

Brazil ECD Statistics CD-ROM: Brasil, Zero a Seis

Washington, D.C.:
The World Bank, 2000

An interactive CD-ROM being developed by the World Bank on early childhood statistics and indicators in Brazil. Information is available at the national, regional, state or municipal level (over 5,000 municipalities), and is easily accessed using a state-of-the-art software application. The software organizes a vast amount of data on social-economic conditions, education and health of children aged birth to six in Brazil and their families. Enrollment rates in daycare and pre-school services by age can be compared between rural and urban areas, across quintiles of household income per capita, and by levels of parental education. Number of preschool teachers, teacher training and salaries, and daycare and preschool characteristics for public and private service providers are also available. The CD-ROM provides the ability to identify and select indicators, and sort, map and generate reports. It also includes other relevant documents such as the National Curriculum Guidelines and a list of over seventy non-governmental organisations working for children in Brazil. For more information contact: Claudine C. Willoughby at ccobra@worldbank.org.

Aga Khan Foundation/1-0247-010/Jean-Luc Ray

Letters

Ed: We apologize for any confusion our article may have caused, and thank Dr. Thorburn for her clarification regarding her work.

Dear Dr Evans,

I am writing about your excellent article in the *Coordinators' Notebook* No. 22, 1998 which I have just been reading. Gulbadan Habibi had a copy sent to me. The article was very comprehensive and I think reflects very well the situation. There was one thing however, that did concern me and that was the information that was credited to me on page seventeen. It sounds as if the illustrated version of the Denver was developed by me or us and that we found that mothers did the assessment better than professionals. We have not developed an illustrated test such as this and have not done any comparison between parents and professionals on assessment. Further down on the same page (left hand column), in italics, there is a set of questions about assessment that if I remember correctly, were posed by me in my presentation at the meeting. I don't say that I asked all these questions, but certainly some of them, and especially the reference to Play Activities for Disabled Children, which we have been using for many years and which we are now revising. I am not making a big deal about this and I don't suppose there is anything that can be done at this stage. It does explain however, a letter of inquiry that I received from the UK asking for the illustrated version of the Denver!

With best wishes,

Dr. Molly Thorburn
6 Courtney Drive
Kingston 10 Jamaica

Calendar

■ PAST MEETINGS

October 11–12, 1999

Excellence in Early Intervention
Malardalen University in Vasteras, Sweden

A research symposium, "Excellence in Early Intervention," was held at Malardalen University in Vasteras, Sweden, situated close to Stockholm. Researchers at Malardalen University who are conducting studies about processes and effects of early childhood intervention, "PROFECT", initiated the symposium. It was also part of and international collaboration in the "Transatlantic Consortium for Early Childhood Intervention Studies."

The purpose of the symposium was to illuminate recent research in early childhood intervention in a European and international perspective. The concept of early childhood intervention focuses on interventions with young children with a diagnosed disability and children at risk for disability. A systems theoretical perspective and developmental ecology was the framework for the symposium. The content reflected factors on different levels that relate to the development of children and the role of the family in early intervention. Researchers from universities and clinical settings in Sweden, Finland, Germany, Portugal, and the United States participated. Proceedings from the symposium are available in English.

For more information contact:
Eva Bjorck-Akesson
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Malardalen University, Sweden
E-mail: eva.bjorck-akesson@mdh.se

■ UPCOMING MEETINGS

March 1–4, 2000

Simposio Mundial de Educacion Parvularia o Inicial:
Una Educación Infantil para el Siglo XXI.
Valparaiso, Chile

The World Symposium will bring together a variety of professionals from all over the world who participate in developing programmes for young children and their families. The conference will provide a vehicle for the analysis of what we know from theory and practice about the situation of young children, in the context of opportunities and inequalities that exist as we enter the 21st century.

For more information contact:
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La Junta Nacional de Jardines,
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Santiago de Chile
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E-mail: junji@entelchile.net

April 10–11, 2000

Year 2000 Conference on Early Childhood Development:
Investing in Our Children's Future: from Science to Public Policy
Washington D.C.

In 1996 the World Bank hosted a conference in Atlanta on young children that stressed the need for countries not to forget young children in the years before they enter school. *Year 2000 Conference on Early Childhood Development* will deepen that discussion by focusing on the high returns investment in young children brings—for children, for society, and for economic stability and growth.

ECD 2000 will show how early child development offers a pragmatic and cost-effective way to reverse endemic economic and social inequality within a society. Experts in early child development will discuss programme options and outcomes, indicators for measuring early disadvantage and progress, the ever-present problem of financing, and the benefits governments can expect from a national policy for young children.

The Conference aims to present the latest research findings on human development and to raise policymakers' awareness of how large an impact early intervention can make. For a small investment delivered early in life gives disadvantaged children the tools they need to break the vicious cycle of inherited poverty and to succeed in life.

For more information contact:
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The World Bank
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1818 H Street, N.W., Room G8-034
Washington, D.C. 20433
E-mail: myoung3@worldbank.org
Website: http://www.worldbank.org/children

Calendar

April 26–28, 2000

EFA 2000 Assessment: The World Education Forum
Dakar, Senegal

The culmination of the global EFA 2000 Assessment, the World Education Forum, will take place in Dakar, Senegal, from the 26 to 28 April 2000. The world community will gather to examine the results of this ambitious exercise and to frame a new action plan for education in the twenty-first century.

The World Education Forum will draw its inspiration and momentum essentially from the presence of political leaders, key multilateral agencies and bilateral donors, as well as from representatives of business corporations and international media. Kofi Annan has been invited to give the keynote address, and the heads of the Forum's five convening agencies, (UNDP, UNESCO, UNFPA, UNICEF, and the World Bank) will attend. The Forum will build on the input from country EFA reports and regional EFA meetings held prior to the conference. This will be an invitational conference.

Final countdown

The deadline for country EFA reports is approaching. In the coming weeks, the some 180 countries participating in the global EFA 2000 Assessment of progress made in basic education in the 1990s are expected to submit their national reports. The reports will analyse the problems encountered, the areas in which progress has been registered, and the human and financial resources needed to achieve basic education for all.

In the past months, ten regional technical advisory groups (RTAGs) have organized fifteen technical workshops and reviewed seventy-six draft reports. In some regions, such as East Asia and the Pacific, RTAGs have employed consultants specifically to assist the national EFA assessment teams to improve the quality of the drafts. In other regions, RTAGs have contacted UNESCO's new Institute for Statistics for assistance in reviewing the statistical data from the countries.

All national reports should be sent to the nearest RTAG and to the EFA Forum Secretariat, both as hard copy and electronically. UNESCO's new Institute for Statistics will also receive a copy for reference. Based on the reports, consultants will write regional synthesis reports, which will be presented and discussed at the upcoming regional EFA meetings. All national reports will be available on a CD-ROM and on the EFA Forum website prior to the World Education Forum in Dakar, Senegal, next April.

Regional EFA meetings

Six regional EFA meetings to discuss national EFA reports and decide on future action have been scheduled around the world from December 1999 to February 2000.

- *1–3 December 1999: The E9 Meeting in Recife, Brazil,* organized jointly with the UNESCO/OECD World Education Indicators project.
- *6–10 December 1999: The All-African Conference in Johannesburg, South Africa,* organized back to back with the biennial conference of the Association for Development of Education in Africa (ADEA).
- *17–20 January 2000: Regional EFA Meeting for Asia and the Pacific in Bangkok, Thailand.*
- *24–27 January 2000: Regional EFA Meeting for the Arab States and North Africa in Cairo, Egypt.*
- *Early February 2000: Regional EFA Meeting for Europe and North America in Warsaw, Poland (exact dates not available at time of publication).*
- *Early February 2000: Regional EFA Meeting for Latin America and Caribbean in Santo Domingo, the Dominican Republic (exact dates not available at time of publication).*

In addition, a sub-regional meeting on EFA in the Caribbean took place in Kingston, Jamaica, from 6 to 10 December 1999.

The RTAGs are in charge of organizing and mobilizing financial resources for the regional EFA meetings. It has been decided that the agenda, while not limiting itself to the following items, should review statistical evidence from country reports on educational development since 1990; look at challenges in the years to come, including economic, social, demographic, environmental etc issues; and formulate educational priorities and strategies. The meetings will also discuss issues of special interest and matters relevant to local socio/political and economic circumstances.

The regional meetings will serve as a major input to the World Education Forum in Dakar next April and will discuss a draft action plan for education in the twenty-first century. Moreover, it is hoped that the meetings will accelerate the Education for All process in each region.

For more information contact:
The EFA Forum Secretariat,
UNESCO, 7, Place de Fontenoy,
75352 Paris 07 SP, France.
Fax: (33) 1 4568 5629;
E-mail: efa@unesco.org
Website: www.unesco.org/education/efa

Calendar

May 16–19, 2000

World Forum on Early Care and Education
Singapore

Join early childhood leaders from around the world to exchange creative ideas on the delivery of quality services in diverse settings.

In April, 1999, 520 early childhood leaders from thirty-six nations gathered in Honolulu to share ideas on delivering quality services in diverse settings. The event was a huge success with many of the participants referring to it as an "eye-opening" or "life-changing experience". Based on the response to the first-ever World Forum on Early Care and Education, Child Care Information Exchange is currently planning World Forum 2000 to be held on May 16–19, 2000 in Singapore. Our goal is to make World Forum 2000 an even more enriching experience for 600 early childhood leaders from sixty nations.

We invite you to join us for World Forum 2000. Learn about all that is planned for this event by browsing the website (http://www.ccie.com). Then register directly from the website or by printing out and mailing the registration form.

For further information contact:
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Calendar

August 29–September 1, 2000

Complexity, Diversity and Multiple Perspectives in early Childhood Services: 10th European Conference on the Quality of Early Childhood Education
Institute of Education, University of London, London, England

The aim of this conference is to bring together many researchers and practitioners from countries in and beyond Europe to discuss research policy and practice in early childhood in relation to the theme. Questions to be addressed include: What are the issues and changes—economic, social, environmental, technological, scientific, political, cultural, philosophical—which are shaping early childhood policy and practice? How can we analyze the relationship between early childhood service and the world we live in, and balance local trends and conditions against a wider international picture? What disciplines and perspective can help our analysis? What are the implications for early childhood services in a world where complexity, diversity, and multiple perspectives are increasingly recognised, but at the same time standardization, uniformity, testing, and measurement dominate the agenda? These are just some of the questions to which the conference theme gives rise.

Continuity groups, held throughout the conference, led by group leaders from the majority and minority worlds, will offer a sustained opportunity for all participants to discuss, from their different perspectives, the themes which are being introduced.

For more information contact:

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Aga Khan Foundation/4-1417-079/Jean-Luc Ray

The *Coordinators' Notebook*, a publication of the Consultative Group on Early Childhood Care and Development, is published twice annually.

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THE CONSULTATIVE GROUP ON EARLY CHILDHOOD CARE AND DEVELOPMENT (CG) is an international, inter-agency group dedicated to improving the condition of young children at risk. The CG grounds its work in a cross-disciplinary view of child care and development.

Launched in 1984, the CG has taken as its main purpose the fostering of communication among international donor agencies and their national counterparts, and among decision-makers, funders, researchers, programme providers, parents and communities with the goal of strengthening programmes benefitting young children and their families.

The Consultative Group is administered and represented by its Secretariat. The Group includes a broad-based network of participating organisations and individuals who share a commitment to fostering the well-being and healthy development of young children. Administrative support is provided by the Office of International Affairs at Ryerson Polytechnic University.

The *Coordinators' Notebook* is prepared by the Secretariat of the CG with support from UNICEF, UNESCO, USAID the World Bank, the Aga Khan Foundation, the Bernard van Leer Foundation, Christian Children's Fund, High/Scope Foundation, InterAmerican Development Bank (IDB), Rädda Barnen, and Save the Children USA.

GOALS

TO INCREASE THE KNOWLEDGE BASE The CG gathers, synthesizes and disseminates information on children's development, drawing from field experiences, traditional wisdom and scientific research.

TO SERVE AS A CATALYST The CG works to increase awareness of issues affecting children, developing materials and strategies to help move communities, organisations and governments from rhetoric to practice, from policy to programming.

TO BUILD BRIDGES The CG fosters networking among those with common concerns and interests, working across sectoral divisions, putting people in touch with the work of others by organising meetings, by disseminating information through publications, and by serving as a communications point.

TO SERVE AS A SOUNDING BOARD The CG engages in dialogue with funders and decision-makers about developments in the field, providing the base for policy formulation, planning, programming and implementation.

Members of the Secretariat occasionally provide technical assistance to individual organisations in programme design, implementation and evaluation, and in the writing of technical papers and reports.

The *Coordinators' Notebook* is produced twice annually. It is one of our networking tools. Each issue focusses on a particular issue or topic, as well as offering network news. We try to provide information on the most appropriate research, field experience and practices to benefit individuals working with young children and their families. We encourage you to share this information with the other networks you take part in. Feel free to copy portions of this *Notebook* and disseminate the information to those who could benefit from it. Please let us know about any programmes or efforts benefitting young children and their families in which you may be involved.

For further information and to subscribe contact:

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